

Chemist & Druggist

April 20 1974 THE NEWSWEEKLY FOR PHARMACY

Policies of
the Council
candidates

Pharmacy
students in
conference

Titles: an
advertising
concession



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The newsweekly for pharmacy

20 April 1974 Vol. 201 No. 4909

115th year of publication

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Mr Anthony Banks has been elected the new president of the British Pharmaceutical Students' Association (see p 464)

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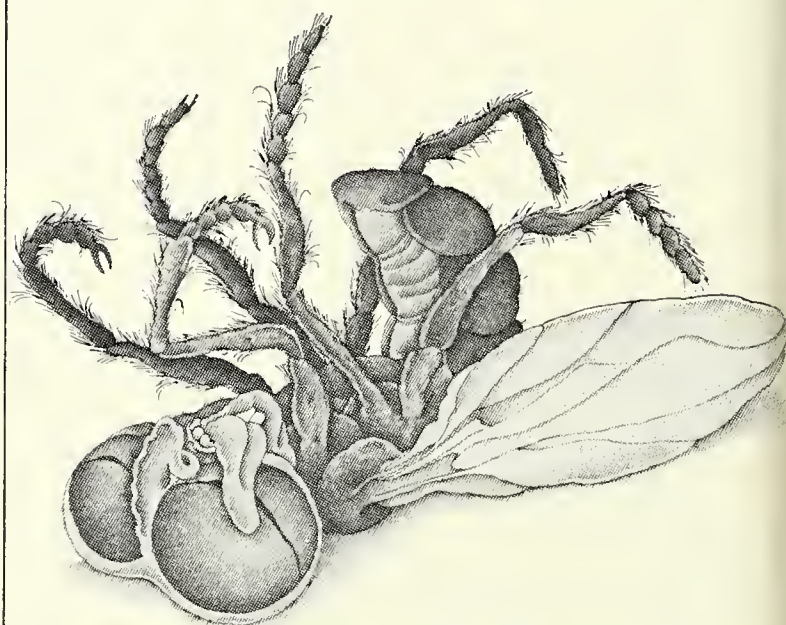
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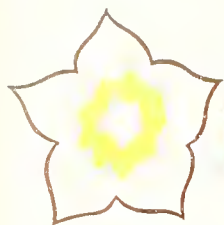
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We look forward to hearing from you.

Yours sincerely,

*Martin Viner
Executive Director*

Comment

Student action

Last week's British Pharmaceutical Students' Association Conference (p 464) finished by the students giving the Association a massive vote of confidence. Almost the last discussion was on a motion to disband the Association, but it was defeated overwhelmingly.

The motion was proposed by two outgoing executive members who had been 'disillusioned' by lack of support. However, another outgoing executive member felt that little constructive matter had come out of last year's conference but after this year's conference "BPSA does really mean something now."

Indeed, the new president, Mr Tony Banks, recognises that the Association has lost too much support by not communicating with members, and said that the coming twelve months will be a 'communications year'.

Mr Banks thinks of BPSA as a junior branch of the Pharmaceutical Society and it is not BPSA's province to voice an outside opinion. Certainly, the students tended to follow the thinking of the majority of their elders on most matters. They passed motions deploring any Government wish to bring about nationalisation in pharmacy and abhorring the decision taken by the National Association of Health Students upon nationalisation in pharmacy. (*C & D*, December 1, p775).

The students felt that NAHS was a political body. Wishing to maintain an apolitical path, they voted to stay out of NAHS, but felt that they should let NAHS know BPSA's views on nationalisation, whether that could be construed as political or not.

As at previous conferences, there was strong feeling about banning the advertising of medicines. The students seemed dissatisfied with Mr Astill's explanation that no Government would ever take

such a step involving such a restraint of trade, and tabled two motions on the subject. One motion, which was passed, was that the advertising of substances on the general sale lists should be banned. The other, perhaps showing the depth of feeling of some of the delegates, was that the Pharmaceutical Society's Council should recommend that medicines which are advertised should not be sold to the general public by pharmacies.

The idea behind the second motion was that if such products were only on sale in supermarkets, a dangerous situation would develop which, in a few years, would be realised by the Government, and a swing-back would occur where the products would only be allowed to be sold by pharmacies and advertising of such products would be banned.

Rightly, most delegates felt it would be too dangerous a move. However, the proposer of the motion felt that although pharmacists could not gamble with people's lives, advertisements were doing so by inducing people to take more medicines than they needed.

The motion was defeated on a simple majority, but more abstained than voted either for or against as they wanted to ban advertising but felt the risks involved in that course of action were too great.

Last year our Comment on the conference was headed 'Student silence', there having been a distinct lack of formal concern with the practice of the profession. Many participants later agreed with this assessment and we are therefore pleased to report that the criticism appears to have evoked a response. As the new president said, the number of resolutions passed by the conference will give the executive "a real workload".

Post Scripts

The prize they prized

Broad smiles were to be seen at Gillette's sleworth factory recently when the fact became known that the company had won an important award. Not easily explicable was the fact that the smiles were accompanied by a certain amount of giggling and even an occasional guffaw. The reason was that the prize they won was the bronze award presented by the Sales Promotion Executives Association for a promotion in the class for non-food products. Gillette received the Award for



Derek Coward with the award

their "Three Centuries of Cricket" promotion last summer and the award itself was a handsome sword-hilt buried, Excalibur-style, in a piece of rock. What caused the less than seemingly mirth was that the award had been donated by their old rivals, Wilkinson Sword Ltd. Said a solemn-faced director of marketing, Derek Coward: "We are naturally delighted to have won this award. Our problem at the moment is trying to decide where to put it"

There lies the danger!

Where is the "danger" in the beauty-health market? Readers who spotted the "undeliberate mistake" in our New Product headline (April 6) can rest assured that Bayer Pharmaceuticals' latest introductions offer no cause for alarm—the only "danger" lies between the pen and the printer's type!

Open display of medicines in pharmacies criticised

Chemists were criticised for displaying medicines within reach of small children in the "Whistleblower" column of *The Observer* colour supplement last Sunday. The column, which gives readers an opportunity to air grievances, quotes Mrs Chris Youngs, of Romsey, Hampshire. She feels that chemists should be required by law to cover the top of all medicine counters with glass.

Mrs Youngs, a state registered nurse, recently discovered that her two children, aged two and four, had taken a tube of indigestion tablets off the open counter of Boots in Romsey.

The Observer says there is no doubt that chemists do display such drugs as "aspirin, stomach powders and pills, cough lozenges, laxatives (including the chocolate-bar variety) and codeine" on the front of open counters. One chemist had an assortment of animal medicaments with pictures of dogs and cats on them at toddlers' eye level.

"Many chemists admit that children do take away drugs. 'They can be an absolute menace,' said one pharmacist." He went on to suggest that it is the parent's job "to make sure that the child doesn't lift our stock."

On counter fronts

Boots told *The Observer* they could recall no instance where a child had come to harm through taking tablets or medicines from one of these displays. "We have strict rules governing not only the sale of medicines—always from a service counter with trained assistants behind. None of these drugs are ever on self-service fittings where you can get things like toothpaste or soap."

But, the paper reports, "Whistleblower, in fact, found that every Boots branch it visited had aspirin, indigestion tablets and codeine in the front of its counters, albeit under the eagle, if busy, eye of the trained staff."

The Boots spokesman pointed out that prescribed drugs or "anything more dangerous than the simpler proprietary pills" were kept inside the dispensary. He said that aspirins were available in slot machines in many public lavatories.

Mr Frank Eggleston, Press officer of the Pharmaceutical Society, said the Society would like the Medicines Commission to suggest putting a ban on self-service medicine.

Supermarkets criticised too

□ In *Woman* recently, the Nurse Williams column criticised supermarkets for placing medicines on low shelves near to the check-out. An approach to a manager had brought action—and he had drawn his head office's attention to the danger,

the chain have over 800 branches, since he hoped it would become company policy that medicines are placed out of children's reach.

Hospital pharmacists vote for special group

Hospital pharmacists have voted in favour of forming a special group within the Pharmaceutical Society. Results were 802 votes in favour, 36 against.

The Guild Council was told at a meeting on April 4 that the merger with the ASTMS should be effective from April 16.

Although it would not be possible to hold a normal annual meeting this year, a meeting of members would be held at the one-day conference in Guildford, May 18. Officer's reports will be discussed but resolutions proposed could be noted only as expressions of opinion.

The Staff Commission (England) is to be asked to agree to open competition for future appointments of area pharmaceutical officers and regional pharmaceutical officers in England.

Record spending on British medical research

Britain spent a record £108 million on medical research in 1972/73. This estimate represents an increase of almost 20 per cent over the previous year and a four-fold increase over the past 10 years.

An Office of Health Economics information sheet says government financed research accounted for 61 per cent of the total and the pharmaceutical industry for about 25 per cent. The rest was provided by charities and trusts.

In 1962/63 the industry had accounted

for about one third of the total. Mr George Teeling-Smith, director, Office of Health Economics said that industry's expenditure might have risen faster had there been less downward pressure on pharmaceutical prices and less political uncertainty surrounding the industry. He pointed out, however, that a recent NEDO study has shown that the industry's research expenditure in Britain had been proportionately more productive than pharmaceutical research expenditure in the US.

Metrication Board's report urges Government action

The Metrication Board's fifth report *Going Metric—The Next Phase* published on April 10 says 1973 was a year of steady though slow progress but the momentum lost in 1971 and 1972 was not regained. The metrication programme will fall still further behind unless positive action is taken by the Government during 1974, adds.

The main recommendations are: The remaining legislative obstacles to the metric change should be removed. In particular it should be made legal to sell prescribed metric quantities all those goods which when pre-packed must at present be sold only in imperial quantities. The Government should seek specific powers to set terminal dates for the use of imperial weights and measures in retail trading.

Ministers, their officials and local authorities should emphasize their commitment to the metric change and the Board should be provided with the resources to carry out a sustained and substantial publicity effort to meet the information needs of the general public about the metric changes.

Mr P. J. L. Homan has been appointed director and member of the Board in succession to Mr G. Bowen who is retiring from the public service at the end of April.

Irish Congress in Waterford

This year's Irish Pharmacy Congress will be held in the Ardree Hotel, Waterford, October 6 to 10. The president of the organising committee is Mr E. Grubb. Mr R. Phelan is the chairman, and other committee members include Mr D. Toomey and Mr P. Delany.

Mr M. Armstrong (second right) president of the Ulster Chemists Association, presents a pen to Mr G. Davies, chief pharmacist, Lagan Valley Hospital.

The pen was one of the prizes in a competition held by Vestric in Belfast. Also in the picture are Mr F. Morrison, manager, Vestric's Belfast branch and Mrs M. Caldwell (telephone sales supervisor)



Pharmacy is 'first choice' for students

A pharmacy course was the first choice of nearly three-quarters of new pharmacy undergraduates this year, said Mr J. O'Brien, the British Pharmaceutical Students' Association's information officer.

The results of a BPSA questionnaire returned by 300 first-year students from 16 schools of pharmacy showed that 71 per cent gave pharmacy as their first choice. Of those students not choosing pharmacy at first, four-fifths had originally applied for medicine and a tenth for dentistry.

"Good prospects and responsibilities" was given by 21 per cent as the reason they were undergoing a pharmacy course, 18 per cent said they had wished to do a science course and 17 per cent were "interested in the medicinal side". Five per cent said it was the only course they could get into and four per cent gave their reason as "the money". Nearly four per cent said they had "worked in the trade", four per cent had "a friend or relative in the business" and pharmacy was the "life ambition" of nearly four per cent.

Of the 49 per cent of students who had read literature about pharmacy, over half (58.8 per cent) had read the Pharmaceutical Society's careers publications but less than one tenth (8.8 per cent) had read career information published by Boots Co Ltd. (Conference report, p 464.)

Pharmacy assistant for trial on theft charges

A 59-year-old pharmacy assistant has been committed for trial at Inner London Crown Court on charges concerning the theft of over £3,000 worth of drugs. He appeared at Thames Court last week.

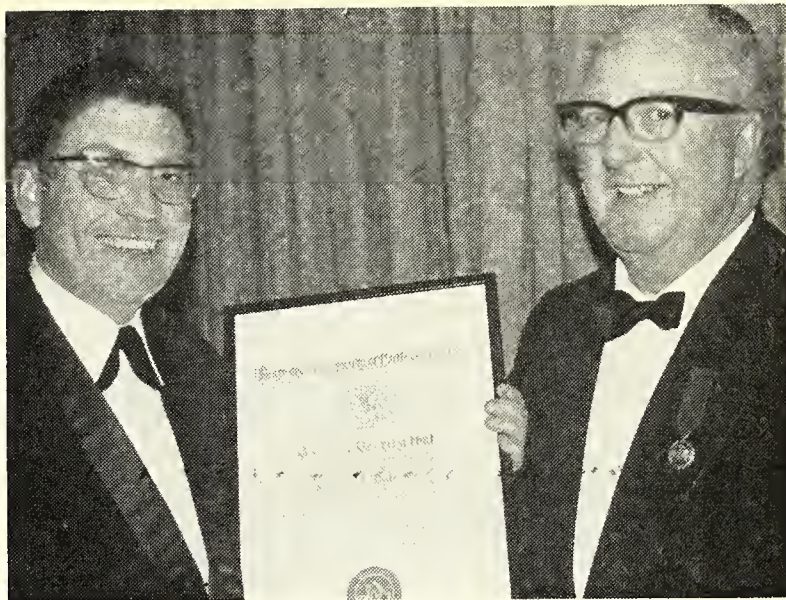
Mr Atha Caraveles, Acton, was charged with stealing £1,781.83 worth of drugs and chemists sundries, and a tape deck valued at £115.25 from 488 Bethnal Green Road, Bethnal Green, in September 1973. He was further charged that he tried to earn money by posing as a pharmacist at that address on or before July 1973.

He is also accused of stealing drugs valued at £431.21 from Harfleur Cosmetic Chemists, 193 New Kent Road, Southwark, between August 13 and September 7 and £340.63 worth of drugs from them at 107 Lower Bridge Road, Southwark, between September 8-30 and that he obtained remuneration as a pharmacist at the Lower Bridge address.

Between June and July 1973 he is alleged to have stolen drugs valued at £1,011 from Dillons Chemists Ltd, 123 Lavender Hill, Battersea and to have dishonestly obtained remuneration as a pharmacist with them.

On March 8 he is said to have stolen

Mr J. N. Patterson (right) receives his fellowship certificate from Mr T. A. Gray, president of the Pharmaceutical Society of Northern Ireland. Mr W. F. Patton, chairman of the Society's Statutory Committee since 1946, received his honorary member's certificate and Mr W. H. Boyd his fellowship certificate.



£129 cash, from Mr S. L. Sinclair, 135 Streatham High Street, Streatham.

He was granted bail of £100 with a surety of £350 and another on the condition that he lives at a specified address and reports weekly to the police.

New treatment for paracetamol overdose

Intravenous cysteamine prevented liver damage in patients who took large overdoses of paracetamol, according to a report in a recent *Lancet*.

A total dose of 3.2g cysteamine was given on seven occasions to five patients, one of whom took paracetamol in three episodes of self-poisoning, by doctors at the regional poisoning treatment centre, Edinburgh Royal Infirmary. On five occasions there was no clinical or biochemical evidence of hepatic necrosis and on two occasions liver damage was only mild and transient. The treatment was effective even when given as late as 8-10 hours after ingestion.

The authors suggest that cysteamine inhibits formation of toxic metabolites or combines with the active paracetamol metabolite within the hepatocyte, thus preventing alkylation of liver-cell proteins.

Cysteamine was formerly marketed as Becaptan by Horliks pharmaceutical division, for the treatment of radiation sickness.

Oxfam to form medical group in Glasgow

Oxfam's Glasgow city office are asking members of the medical and para-medical professions to join a voluntary group to support the aid programme to the developing world.

Membership of this first Scottish group will be limited to people living or working in Glasgow. A medical group has also been established in London. Mr Finlay Craig, the Glasgow organiser, sees pharmacists making a useful contribution to the group by advising on sending drugs abroad. Contacts in the pharmaceutical industry are useful, for example, when vaccines have to be exported on a large scale to the developing countries. Details from Mr F. Craig, Oxfam regional office, 65 Renfield Street, Glasgow.

Drug store script service complaint goes to MP

Argument still continues over a prescription collection and delivery service operated from a drug store in Broughton, Chester.

The scheme ended soon after its launch early this year. There have been complaints from pharmacists running a similar service, approved by the executive council, from a Broughton newsagents (*C&D*, February 16, p 147).

Mr Barry Harrison, chairman of the former Denbighshire and Flintshire Pharmaceutical Committee said that the Broughton and Bretton residents association are now objecting, saying that the drug store service was quicker and more convenient. Mr Harrison says he fails to see how the service from the newsagents can be improved—prescriptions collected at 12 noon are usually returned by 4 pm, he said. The residents have complained to their MP, Mr Barry Jones, in the hope that he can do something about opening a pharmacy in the area. Mr Harrison has written to Mr Jones and to the residents association to explain the situation.

Hospital pharmacist given suspended sentences

A hospital chief pharmacist was this week given suspended sentences of 18 months imprisonment on each of 13 counts involving stealing and possession of controlled drugs. Additionally in each case he was fined £100. The sentences, which were to run concurrently, were suspended for two years.

The pharmacist, Mr Herman Alan Robinson, Welshwood Park Road, Colchester, was first brought before Chelmsford Crown Court on March 12 (see *C&D* March 23, p 323). He was initially remanded in custody but 45 minutes later the judge reconvened the court and granted bail to Mr Robinson in his own recognisance without a surety, the only condition being that he had a psychiatric examination.

At the final hearing on April 17, Mr Robinson admitted 13 charges involving stealing and the possession of controlled drugs, he was found not guilty on one charge.

Pharmacy students to stay out of 'health' grouping

The British Pharmaceutical Students' Association will not join forces with the National Association of Health Students—that was decided by BPSA's annual conference held in Leicester last week.

Proposing the Executive's recommendation "that at the present time we do not formally enter into association with NAHS," Miss Carmen Wynne-Howells, retiring president, said that if they joined, "it would be the end of BPSA." The British Medical Students Association had disbanded, she said, in order to join NAHS, but NAHS was for a trial period, to form a health section within the National Union of Students. So there was "no advantage" in BPSA joining NAHS as all were members of NUS through their own college unions.

The attitude of the Pharmaceutical Society, the National Pharmaceutical Union and other outside bodies would be affected if BPSA joined NAHS. The Society provided financial assistance and the NPU sponsored a sports competition. The students would have "the best of both worlds" by staying out.

'Political'

Miss Wynne-Howells agreed with a speaker who thought that NAHS would become a political organisation. "This is what we fear," she said. Dental students "categorically say that they are not having anything to do with NAHS" and the veterinary students could not join as NAHS did not regard them as health students.

Another Executive recommendation accepted by the meeting was that the feasibility of a formalised scheme for pre-registration students in general practice should be investigated. Mr J. O'Brien, BPSA information officer, said the Executive had met the NPU who wanted to work with BPSA to see what should be in

such a pre-registration year. The Society had said the Birmingham pilot scheme for joint hospital and retail pre-registration training "was going ahead". Miss Wynne-Howells said the recommendation would be formally put to the Society in June.

Mr J. Knott, outgoing vice-president, recommended "campaign kits" should be introduced to assist college representatives in the recruitment of new members.

Each student should receive a "members wallet" which would include information sheets on such topics as drug interactions, the Society, NPU, Guild, Noel Hall report, and NHS reorganisation. It was hoped it would "build up as a library of useful knowledge" and be more useful than the Handbook which it would replace.

Relations between BPSA and the Society "are extremely good," according to Miss Wynne-Howells. Presenting the president's report she said that the Association and the Society had had discussions on the term "student" in the Society's bye-laws. The Society would not alter it to be "a member of the BPSA" as no association, apart from the Society, was mentioned by name in the bye-laws. However, the Society's definition of "student" closely resembled that in the BPSA constitution. BPSA had also been granted "an entire section" of the Society's calendar in addition to being mentioned in the education section.

Careers advice to pharmacy students 'inadequate'

Careers officers in the colleges "are not really doing their job", according to Mr A. Banks, new BPSA president.

Proposing a Sunderland college motion that BPSA should set up its own careers advisory panel, made up of experienced industrial, hospital and retail pharmacists, Mr Banks said that "obviously" all col-

leges had some careers advice but despite that "it would appear that many colleges have totally inadequate careers advice". Honours students did not know which options would best suit them for the different branches of pharmacy. He had had discussions with "certain members" of the Pharmaceutical Society who held the opinion that a lot more could be done generally "to bring home to the student what was available in the form of careers".

BPSA would obtain industrial, retail and hospital pharmacists prepared to go around to each school of pharmacy to speak to students in their first and second years "when the formative part of the pharmacy course is taking place." Already he knew people in industry willing to do that and he had support from hospital area and principal pharmacists.

Mr D. Gwillim, Portsmouth proposed that a greater use of placebos should be encouraged especially with "pharmacological" drugs. Mr D. Pavey thought "we're getting far too drug dependent; it would be far better if we got placebo dependent." Miss S. Ashton, Square, said placebos were used more some 20 years ago and she thought that doctors would support such a move.

National campaign

Conference deplores overprescribing by doctors and the Pharmaceutical Society should sponsor an annual national campaign against the hoarding of unwanted medicines, proposed Miss S. M. Brignall, Cardiff. While recognising that lasting effect "would only come from persistence in attempts to educate the public in general about the lethal implications of a cabinet full of old medicines," she felt there should be a national unwanted drug collection and a campaign to get people to take the medicines prescribed for them. The motion was carried.

Other college motions passed included: that the issuing of personal medication record cards to patients "should be the rule and not the exception to the rule" (one speaker felt it would be a "practical alternative" to patient registration with a pharmacy); that dispensing by doctors should cease and mobile pharmacies be set up to cover such areas; that medicinal products containing aspirin and/or paracetamol should be sold only under the supervision of a pharmacist; that BPSA should implement an anti-smoking campaign amongst its members; and that the feasibility of forming representative sports teams from BPSA to play other representative international pharmacy sides should be investigated.

Private members motions passed included: that the medical profession should be approached to give precise directions on prescriptions and not such terms as "use as directed" and "as before"; that the Executive should get BPSA recognised by local authorities and the Scottish Education Department as a national body for pharmacy students; that the Executive request a policy statement from the Society regarding patient registration with pharmacies; and that an academic committee be set up within the BPSA with the aim of improving the pharmacy courses, and the committee should liaise with the Society, NPU and college academic boards.



BPSA Executive for 1974-75. Mr A. Banks, the new president, is fourth from left, back row.



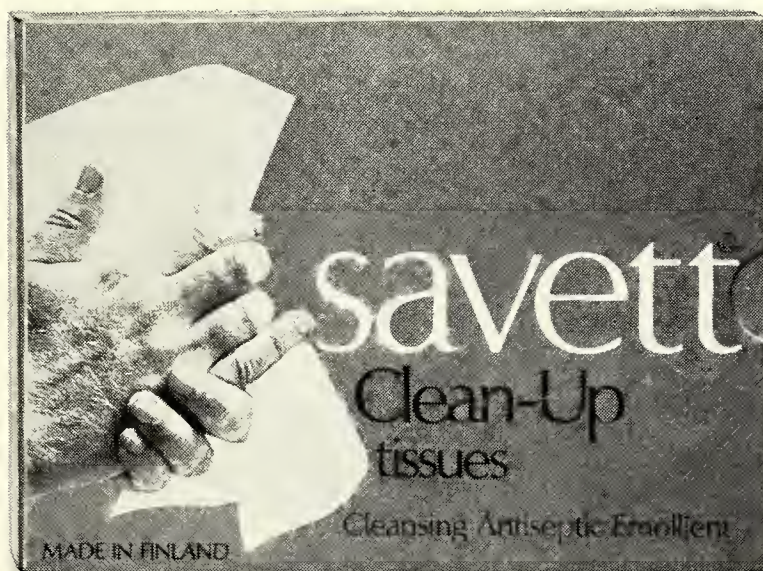
Heavy advertising for this new range of profit-making tissues



from Nicholas Products begins next month in Woman,



Woman's Own, Woman & Home, Nova, She, and Cosmopolitan.



Make sure you're ready to sell the whole range.

Nicholas

BPSA Conference

continued from p 464

£8,000 pa for proprietors 'adequate'

The ideal distribution of retail pharmacies in urban areas would be about 1½ miles apart, each serving a residential population of about 8,000 people, according to Mr T. P. Astill, deputy secretary, National Pharmaceutical Union.

Speaking in the Forum session "Pharmacy practice, private eye and public eye", Mr Astill said that everybody should be within easy walking distance of a pharmacy. He quoted Lord Justice Buckley's statement in the resale price maintenance case on medicines that "a plentiful and well distributed supply of such shops is . . . desirable". From this a distribution of pharmacy could be calculated for urban areas. These "ideal" pharmacies would have a turnover of about £40,000 a year, with a gross profit of about £10,000 per annum. That would put money into the pharmacist's pocket of about £6,000, but could vary between £4,000 and £8,000.

'No more than adequate'

"£8,000 I think should be regarded as adequate, but no more than adequate", said Mr Astill. Most pharmacists could probably earn up to £4,500 per annum as employees, not proprietors, bearing in mind pharmacy "was rapidly becoming a high risk business". Retail pharmacy was dependent on many factors not under the control of the proprietor "and in accepting those risks the pharmacist is quite justified in expecting his remuneration to compensate for it". The number of pharmacies on the register he expected to level off to about 8,500 in the next ten years, being some 6,500 community pharmacies and about 2,000 specialist, rural, and town centre pharmacies.

Purely professional pharmacy "is only available to a tiny and fortunate minority" and the way to obtain it for all would be

by a remuneration increase; a decrease in pharmacy numbers (Mr Astill regarded that as "unacceptable" beyond the limits already stated); or an increase in the demand for medicines, which would be "hardly likely".

The gross profit on OTC medicines was unlikely to rise. Retail pharmacy did not have a "big stick" which it could use in negotiations on NHS remuneration but had to rely on the force of argument. Although in the past argument had been used to good effect, Mr Astill submitted that "it will never be used to an effect that will result in a majority of retail pharmacists being able to make a living solely from the dispensing of NHS prescriptions and the sale of medicines."

In many places the community pharmacist was replacing the doctor as the family confidant. Mr Astill criticised pharmacists who envied the "mystique and seclusion" of other professions: "The pharmacist's greatest asset is his accessibility." He also felt that the pharmacist's qualification was "more or less unrelated" to the job he was expected to do. "Some colleges seem reluctant to acknowledge what they're training pharmacists for".

"Are we using industry as we ought?" asked Mr M. J. S. Burden, area pharmaceutical officer, Leicester. "While I'm aware of the dis-incentives of nationalisation, I would hope we could liaise with the industry so that innovation would start in hospitals rather than in some industrial 'think tanks'." Hospitals could organise their activities to obtain from industry "those items where economics of scale and sophisticated, automated lines present and produce an advantage" and produce within the service the "specials" and "one-offs" eg eye drops for general practice.

'Ban advertising'

"I'd like to ban the advertising of medicines to the general public", said Mrs Estelle Leigh, a member of the Pharmaceutical Society's Council. Responsibility and service to the public was "paramount" and medicines should only be sold by pharmacies. That implied curbs on the display of goods to encourage impulse buying, and restriction of self-diagnosis and self-medication.

Dr D. Anderson, Portsmouth School of Pharmacy, said that the most important difference which distinguished the pharmacist from other graduates was his training in pharmaceuticals. There were drugs which needed careful blood level

monitoring: "Is this a role for pharmacy he asked. On the question of the notification of side effects he asked: "Is this not be done by a pharmacist?"

During the discussion, Mr Astill said I also was in favour of a ban on the advertising of medicines to the public. However that would need a restraint of trade that so far no Government had been prepared to grasp. Both major political parties were against monopoly situations.

Mr Burden felt that the Medicines Commission were now becoming critics of hospital departments. "I think it won't be long before licensing of hospital departments, particularly those involved in any sort of production, will be introduced," he said. It would be a good thing to have the same standards set for the industry and hospitals. It would also help in arranging finance from hospital management for improvements if a licence would not be granted in the present condition of the department. "It's vitally important that the medicines inspectorate remain independent of the Department of Health," said Mr Burden, adding that the inspectorate should not be bound by the cost of attaining the standards they set.

Postgraduate year

On the question of the preregistration year, Mr Astill said that ideally the postgraduate should be completely supernumerary, but the general practice pharmacist had to use the student to "fill a slot". The NPU and the Society asked the Department of Health for help in paying for the training and were awaiting the reply.

Mr Burden suggested making the preregistration course four years, with the preregistration year "examinable, tutorable, and somehow controlled". He also suggested that newly qualified pharmacists should "live in" at hospitals — doctors became self-assured because they had all been junior hospital doctors, who had the "rough end" and were thrown onto their own resources.

In the other Forum session, Mrs Prentice, a member of the Womens Institute said she thought pharmacists had an inferiority complex but really pharmacy had a good image. "I don't know anybody who has a poor opinion of chemists".

Dr D. C. A. Candy, paediatric registrar Leicester, said he would like to see pharmacists "pressure drug firms to produce more flexible formulations for use in paediatrics". There was no syrup of fructose of low concentration for use in babies and young children, and also no stable nitrazepam suspension. Sister C. J. Davies, Leicester Royal Infirmary said she thought pharmacy staff were not completely "au fait" with paediatric formulations: "sometimes it is easier to crush up tablets than give as a syrup".

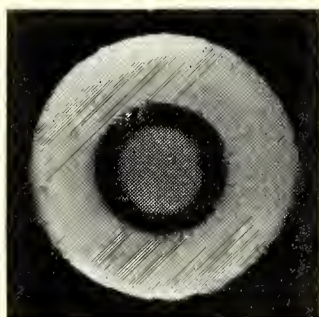
Detective sergeant Miller, Leicestershire constabulary, said that pharmacists were "sitting on a gold mine: 100 Tuinal tablets could be worth £50-£60 on the "black market". Pharmacists were unwittingly the source of the drug problem as they held the main stocks and he was glad to see the safe custody regulations which come into force in October. Drug thieves were among the most educated thieves and barbiturates were taken during a break-in. Mr Miller added that he would like to see "tighter legislation on prescriptions" as forged prescriptions were on the increase.



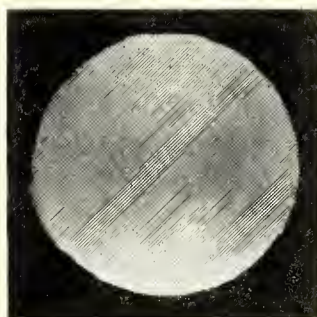
The Lord Mayor of Leicester, Mrs Irene Pollard, and the Lady Mayoress, Mrs Susan Cufflin, with Miss Carwen Wynne-Howells at the civic reception given during Conference week.

Predictor.

The home pregnancy test you can safely recommend.



positive result



negative result

Predictor is the only nationally advertised home pregnancy test you can safely recommend.

Years of research and development have perfected the well-known immunochemical demonstration of HCG in urine to such a degree that now it can be conducted by the woman herself in her own home.

Here is why you can safely recommend Predictor.

Accuracy. Predictor gives the same 99% accuracy that only the best laboratory tests can guarantee.

Speed of Results. Predictor detects HCG pregnancy hormone so sensitively that the test can be conducted only nine days after a period was expected.

And research shows that women consider this a highly important feature.

Privacy. Again, our research tells us that many women prefer to be the

first to know about their pregnancy.

Predictor is the ideal solution.

Reliability & Simplicity. Predictor is simple. The test can be set up in a few minutes and the results read two hours later.

As is demonstrated in the pictures above, the result is also perfectly simple for women to interpret.

A letter to the BMJ* describes in-home trials organised by three doctors and concludes '...this test provides reliable results in the hands of the general public.'

Predictor sells only through chemist outlets, which means that customers will be asking you for Predictor.

Predictor sells at £2.00 per test which means profits to you of up to £1.00.

*BMJ 13th Jan. 1973 pp 112/113.

Predictor

The home pregnancy test you can recommend.



New

It makes other feminine towe

Women have proved it. Nationally.

Women have tried and tested new Mene. And they liked what they tried. They found new Mene more comfortable than the towel they normally use.

Free Tights offer.

Quality tights will be offered free in return for proof of purchase from two new Mene packs for the launch period.

**Free
Tights**

micromesh
stretch tights

Mene.

Feel a little less comfortable.

National Advertising to boost sales.

New Mene will be advertised with great impact in colour in specially selected magazines. In fact, 3 out of every 4 women in the market will read why they should change to new Mene.

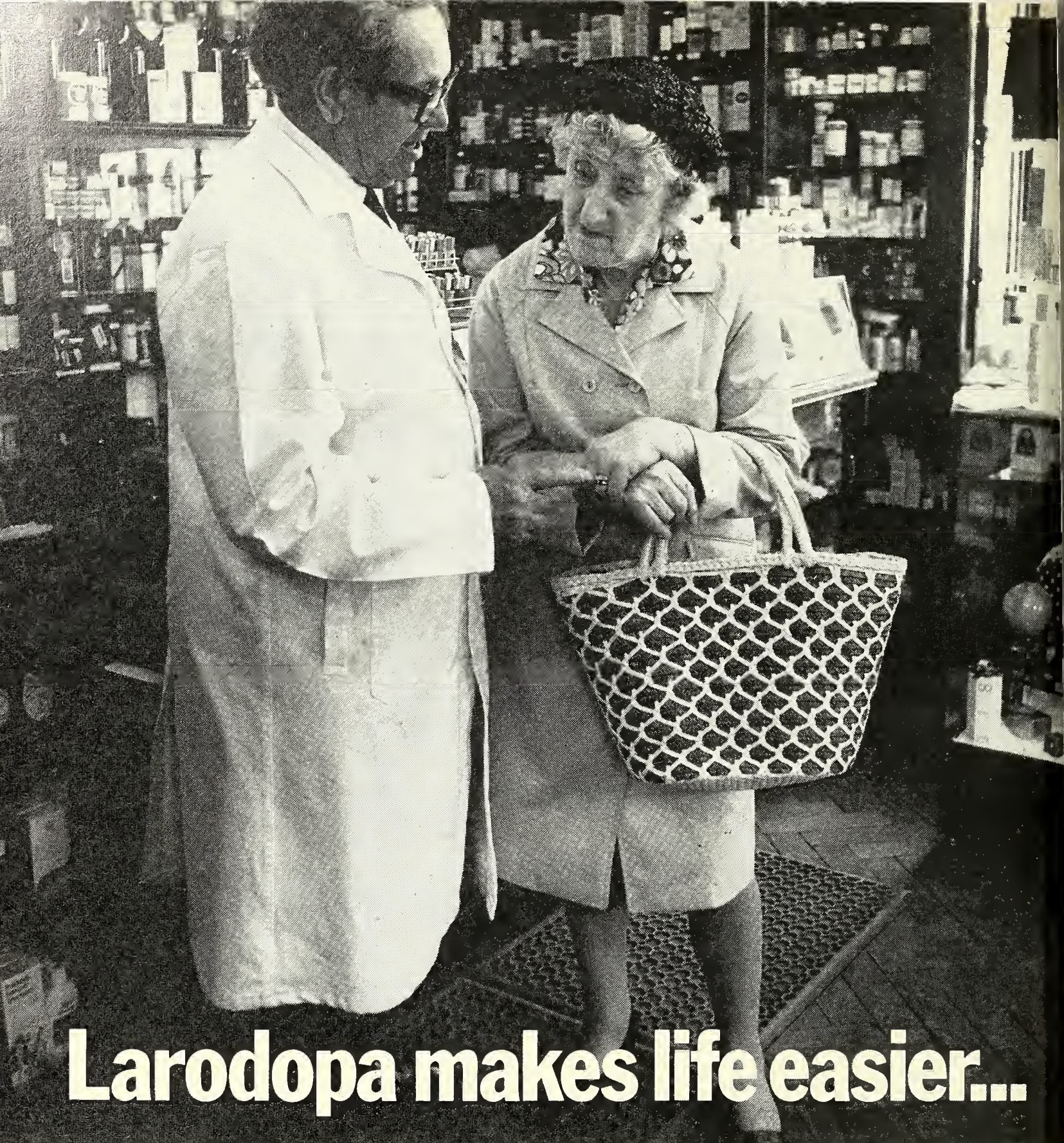
Trade Bonus. A generous trade bonus is available. Contact your wholesaler or representative now.



Robinsons OF CHESTERFIELD



New Mene. New comfort in feminine towels.



Larodopa makes life easier...

For you

Dispensing generic levodopa prescriptions means a fresh decision every time—it doesn't happen often enough to form a habit. But Larodopa is levodopa in a form that is convenient for you because the double scored 500mg. tablet will fit, simply, into any dosage regime: and, as Larodopa is the most economical presentation of levodopa, you will be fully reimbursed by the Pricing Bureau.

For the patient

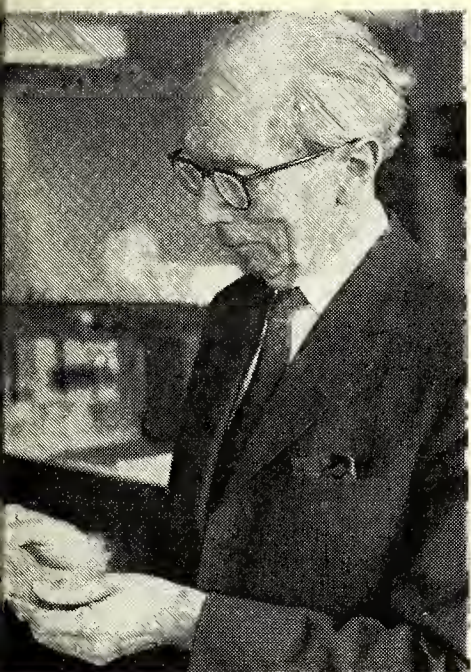
Larodopa tablets are double scored and can be broken into halves or quarters, thus providing the versatility of dosage necessary for the effective management of Parkinsonism. Which means one less worry for a patient who has quite enough to worry about. Further information is available on request from: Roche Products Limited
15 Manchester Square
London W1M 6AP.



People

Stanley Croskell, MPS, manager of **ots Ltd**, at Newark Notts, has retired. He joined the company at Sutton-in-Ash-d, then spent periods at Nottingham, coln and Darlington before taking over Newark.

E. F. Hersant, May & Baker Ltd's quality control adviser has retired after 40 years service with the company. When May & Baker moved to Dagenham in the mid-1930's he was instrumental in setting up the new analytical laboratories. He was joint secretary of the British Pharmaceutical Conference from 1953 to 1968 and its chairman at the 1969 meeting. He was awarded the Harrison Memorial Medal for outstanding services to pharmaceutical science in 1968. He has



served on the British Pharmacopoeia, the British Pharmaceutical Codex, the European Pharmacopoeia and several committees dealing with national and international standards.

He was invited to lecture to the first Commonwealth Pharmaceutical Conference on the role of manufacturers in the marketing and supply of drugs. Dr Hersant has lectured throughout the world on quality control and has recently returned from a lecture tour of Kenya and Tanzania, where he appeared on television and radio and held talks with senior government officials on the importation and control of drugs.

News in brief

The Chemical and Allied Products Industry Training Board's latest information paper deals with basic instructional methods, techniques and aids. Available from the Board at Staines House, 158 High Street, Staines, Middlesex.

During April and May, Kodak Ltd is presenting "Cecil Beaton's camera", a major exhibition of photographs in black-and-white and colour by the distinguished British photographer. The exhibition will be at the Kodak Photographic Gallery, London, April 10 to May 23.

Topical reflections

BY XRAYSER

The past

The annual conference of the British Society for the History of Pharmacy, held this year in Cambridge, illustrated some of the lines of approach likely to prove rewarding to any student of the past. It was evident from the content of some of the papers that the most productive and most fascinating ways of acquiring information is, in the words of Mrs J. Burnby, to seek it from the grass roots. Her account of information she had gleaned from the books of Thomas Bott, an apothecary in Coventry in the early 18th Century, clearly demonstrates the ever-widening interest of the researcher who finds herself captivated by the continuing revelations, first in one direction and then in another.

One would have expected Bott to carry out phlebotomies—probably with the lancet, for the peak of the leech arrived about a century later—and to treat his lordship's leg. The reference to the problems he had in stabling his horse during visits suggests that difficulty in parking is not a modern phenomenon. But the author of the paper was led into strange byways by the study of Mrs Bott's bills and some inventories, together with parish registers and church memorials, and she found herself following the fortunes of other members of the family in different walks of life. By such research, not by any means as simple as it sounds, a broad and accurate picture emerges, not only of Thomas Bott, but also of his associations, his family background and his standard of living.

Mrs Burnby wonders if he was a typical example of the early 18th century apothecary, and concludes that many more such studies would require to be made before one could be sure. I think it likely that she has hit on something which further search will confirm is fairly representative, for all would be working in similar conditions and using the same pharmacopoeia. I congratulate the author on a fine piece of work which, I feel certain, will stimulate her to further productive effort.

A song of travel

There are no longer commercial hotels, for there are no longer "commercial", as they were known before television. Gone is the breed which asked not wealth or hope or love. All they asked was the heaven above and the road below them. And a fine body of men they were—"ambassadors of commerce", they called themselves, with a twinkle of the eye. They were not "representatives" then—they were the firm, taking decisions and full responsibility without having to refer back to an area supervisor, who has to consult a sales director before answering a question. But that was before they became part of a field force of clinical executives "detailing" new products and some not so new. Now I note that they have to be "all things to all men", in the words of Mr D. Godfrey, a director of Wellcome Foundation Ltd. They are now "marketing men". They are not scientists, not production men, not pharmaceutical innovators, not advertising agents, not accountants, not doctors; but they must understand all of these people and be conversant with their particular minds.

The life

Of necessity the marketing man must be, therefore, broad spectrum, for "doctors are sensitive, pharmacists are sensitive, patients are sensitive and governments are sensitive," and if they are to operate successfully sensitivities must not be upset. There's the life for a man like me, there's the life forever.

Trade News

Baby tumbler goes branded

H. J. Heinz Co Ltd, Hayes Park, Hayes, Middlesex, are now expanding their product range into other segments of the £50 million baby products market. The highly successful spillproof baby tumbler is for the first time to be "branded" as a Heinz product. Until now the tumbler has been sold unpacked through chemist outlets or included in special mailings to mothers of young babies, at the rate of several hundred thousand per year. The branded baby beaker (£0.14½) is now being launched to both grocery and chemist outlets and will be distributed on a national basis.

An attractive header card describes the beaker's unique features. The rigid, polythene tumbler is sterilisable, virtually unbreakable and available in two colours, pink or blue and packed in attractive outers containing four dozen units with specific colours clearly marked on the outside.

Extended range

The Tangee range of cosmetics now includes nail enamels, eye shadow palette—containing four toning shadows and applicator—eye gloss, pressed eye shadow, pressed powder compacts and liquid foundations, as well as the lipstick range. The range offers the customer a choice of any two products for the price of £0.35.

A two-tiered counter display containing the complete range is available from Tangee Cosmetics, Winarick (UK) Ltd, Unit 15 Heywood Industrial Estate, Heywood, Lancs.

Scholl summer advertising

The current advertising campaign promoting the range of Scholl clogs and sandals will continue throughout July. Using full-colour pages in major women's weeklies and monthlies, Scholl (UK) Ltd, 182 St John Street, London EC1P 1DH, are aiming to reach two separate age groups.

One advertisement aimed mainly at women aged between 15 and 25, illustrates a new wooden exercise sandal and uses the slogan "Introducing a little more of what you fancy". The other advertisement, on the theme of "You know you need a pair of Scholls", shows a range of clogs and sandals worn mainly by women over 25.

New window displays reflecting the advertising themes are available. They consist of three parts which can be used separately or slotted together, and can hold up to a maximum of 11 styles of Scholl clogs and sandals.

Actal new pack size

Winthrop Pharmaceuticals, Winthrop House, Surbiton-upon-Thames, Surrey KT6 4PH, have introduced a new 84-tablet pack of Actal (6 packs, £1.78 trade). An intro-



Mrs E. Ashford and Mr R. J. Burford, two of a group of four Vestric representatives who flew to Switzerland last week as guests of Pharmaton of Lugano, for their successful sales of Pharmaton capsules in Britain

ductory bonus of 6 as 5 or £1.48 for 6 is being offered.

Care chemists group in N Wales

L. Rowland & Co Ltd, Wrexham are to operate the North Wales franchise of Care chemist voluntary trading scheme from May 1. With 160 independent retail pharmacies in this area this completes Care's coverage of the whole of the principality. Rowland are currently extending their depot at Dolydd Road, Wrexham to 22,000 sq ft.

Day Long sales force

An auxiliary sales force of 18 girls has been recruited by Reckitt & Colman toiletries division, Sunnysdale, Derby, to promote the sale of Day Long antiperspirant to the chemist. Supporting the promotion, the makers plan to spend £250,000 on a television advertising campaign breaking mid-April, and advertisements in women's magazines. There will also be a 10p and 7p consumer discount on the £0.37 and £0.29 sizes, respectively.

Medicated confectionery and VAT

Hall Bros (Whitefield) Ltd, Whitefield, Manchester M25 60T, report that some retailers are adding VAT to their recommended prices since the Budget. They point out that medicated confectionery already carries VAT, it is included in the recommended price.

National coverage given

A national advertising campaign featuring their new double edge razor blade is announced by Wilkinson Sword Ltd, Sword House, Totteridge Road, High Wycombe, Bucks. A 30-second television commercial will be shown nationally until the end of May, plus full-page colour advertisements in national magazines.

The television campaign and colour Press advertising uses the company's traditional "sword" theme—and highlights the new packaging which has been created for the blade. Publications to be used in the Press campaign include national colour

supplements, *Radio Times*, *Readers Digest* and *Penthouse*.

Consumer campaign

Cuxson Gerrard & Co Ltd, 26 Fountain Lane, Oldbury, Warley, Worcs, are launching a "hard hitting" consumer campaign for Carnation corn caps beginning in June and running throughout the summer. Half-page advertisements will be appearing in *Honey*, *Jackie*, and *Nineteen* magazines, aimed at the younger sector of the market, and quarter-pages in *Woman's Realm*, *Woman's Weekly*, *Woman's Own*, and *Woman & Home* to cover the older age group. All advertisements direct readers to their chemist.

Fabergé West on radio

An extensive, five-week advertising campaign is currently being run by Fabergé Inc, Ridgeway, Iver, Bucks, for Fabergé West. The campaign covers advertising on the new provincial radio stations—Radio Piccadilly (Manchester), Radio Clyde (Glasgow), and Radio Birmingham—with the catch line "Fabergé West—the spirit of the West in a new men's after shave lotion". There is also a concurrent campaign in the London area, featuring 30-second spots on London television and full-page colour advertisements in the *Evening Standard*.

Address for Napcolour offer

In our report of a free photo album leaf offer from Napcolour (March 30, p 365), the address was wrongly printed. Subscribers who used the address to take advantage of the offer are asked to repeat their application to Napcolour Ltd, 76 Lower Bridge Street, Chester.

The offer provides a free "photomatic" album leaf with each colour film developed and printed. Covers are available to customers at a special price of £0.69.

Oralcer sample offer

Vitabiotics are repeating during May their offer of two sample tubes of Oralcer pellets. The purpose is for pharmacists to try the product in recurrent and stubborn cases of oral ulcerations where other treatments have failed to produce a response. Requests for free trial samples should be made along with self-addressed and stamped envelope to Vitabiotics Ltd, 1 Beresford Avenue, Wembley, Middlesex.

Price Commission rejections

In March the Price Commission rejected increases sought by Gross Cash Registers Ltd on service call charges, the Sanitas Trust Ltd, on Woodward's gripe water and other baby products. Applications by the Wellcome Foundation Ltd, on pharmaceutical products were withdrawn.

Thermos telephone change

The telephone number of Thermos Ltd, Brentwood, Essex, is Brentwood (0277) 213404, and no longer as given in the March price list.

Apple Blossom saving

Three "spring specials" are being offered by Helena Rubinstein Ltd, 31 Davies Street, London W1Y 1FN, in their Apple Blossom range. They are, a 4-oz perfume mist (£1.25)—normal price of 2-oz size—

250-cc bottle of hand lotion at the 122-cc price of £0.80, and a 160-g size talc (£0.75) at the normal price of the 55-g size.

Cannon Babysafe distribution

Cannon Rubber Ltd, Ashley Road, Tottenham, London N17 9LH, have appointed distributors of the Cannon Babysafe range, Barclay Pharmaceuticals, Lakeside Laboratories, Rawdon, Leeds LS19 7YA. The range includes 4oz and 9oz smooth neck feeders, universal teats and a steriliser kit.

Price reduction

From May 15, Roger & Gallet Ltd, 16 Mottrill Street, London SW6 4EH, are offering Lubin Eau Neuve 2-oz atomiser at a reduced price of £1.60 (usual price £2.00).

Bonus offers

Winthrop Pharmaceuticals, Winthrop House, Surbiton-upon-Thames, Surrey KT6 6PH. Actal 24s and 48s. 12 as 11 on orders of 1 doz of either size; 12 as 10 on orders of 3 doz or more. Hayphryn 12 as 11 on 1 doz; 12 as 10 on 2 doz or more. Until May 31.

N. Toiletries, division of Jackel & Co Ltd, Kitty Brewster Estate, Blyth, Northumberland. Country Lover conditioning shampoo. Large size, 6 invoiced as 5; small size, 12 invoiced as 10.

on TV next week

— London; M — Midland; Lc — Lancashire; York — Yorkshire; Sc — Scotland; WW — Wales; W — West; So — South; NE — North-east; Anglia; U — Ulster; We — Westward; B — Border; G — Grampian; E — Eireann; I — Channel Islands.

Alberto Balsam conditioner: All except CI

Alberto Balsam shampoo: All except CI

Alberto VO5 hairspray: Ln, M, Lc, WW, O

Skit: Sc

Spro Effervescent: Ln

Body Mist: All areas

Close-Up: All except A, We, B

Flow & Gate baby meals: All except U, CI

Flow & Gate babymilks: All except Ln, O, U, E, CI

Gay Long: All except E, CI

Gry Look: All areas

Gillette G11: All areas

Harmony shampoo: All areas

Head & Shoulders: Sc, U, We, B, G, CI

Maybelline Powder Twist: All areas

Old Spice aftershave: All except CI

Right Guard: All areas

Signal: All areas

Spillers Choice Cuts: Y, NE, B

Sunsilk shampoo: All areas

Sunsilk setting lotion: All areas

Sure: All areas

Tegrin: All areas

Vosene: All areas

New products

Cosmetics and toiletries

Conditioning shampoo

The latest addition to the Country Lover range is a conditioning shampoo which contains "pure vegetable protein, and liquified lanolin, plus essential oils of arnica, fennel and valerian with extracts of cinchona and camomile". The product is in two sizes—50cc (£0.29) and 100cc (£0.49)—the smaller size giving up to five treatments, the larger up to ten treatments.

Jackel are planning to continue their consumer advertising campaign for the range with full-page colour advertisements in *Vogue*, *Cosmopolitan*, *Honey* and other women's magazines (J. N. Toiletries, division of Jackel & Co Ltd, Kitty Brewster Estate, Blyth, Northumberland).

No rinse creme rinse

Breck have introduced a creme rinse that is sprayed on to the hair and does not have to be washed out. Spray On Creme Rinse (£0.75) is applied to the hair after it has been shampooed. The hair is then combed through, and may be dried or set in the normal way. The 200cc creme rinse comes in an easy-grip, turquoise PVC bottle.

For a limited period the makers are offering the product at an introductory price to the consumer of £0.55 (Shulton (GB) Ltd, 100 Brompton Road, London SW3).

'Like French perfume'

From France comes a range of fragrances that "smell like the most expensive French perfumes—but cost a fraction of the price." The range is called Replica, and is packed in attractive 50-g glass aerosol sprays. It consists of five fragrances in eau de toilette form (£0.95)—No. 5; Miss D; Madame R; Nina and Cabou.

A parcel of two dozen of each fragrance is offered with a free tester of each fragrance and a display dispenser (Replica, 90 Belsize Lane, London NW3).

Double-ended pencils

New from Orlane this month are double-ended pencils (£1.50), eye shadow pencils that are frosted one end and plain the other. There are four colour choices.

Also from Orlane is Maqui-Bronze, a light, transparent, non-greasy gel which gives a tanned look to the skin. The gel (£2.50) is suitable for summer and gives a "natural suntan look". There are two shades—golden, a warm golden tan, and chocolate, a deep, rich mahogany—and the gel contains moisturisers to prevent the skin drying in the summer weather.

Orlane have repackaged their sun care

range in attractive plastic containers—the Tan Orlane and Lait a Bronzer now are in round bottles with distinctive orange and brown splashes (Jean D'Albret-Orlane Ltd, 125 High Holborn, London WC1V 6QX).

A suncream compact

A new sun care product from Payot is Duo Solaire (£1.95), two tinted sun protection creams presented in an elegant, brown veined plastic compact complete with mirror. The interior of the Duo Solaire pack is divided into two sections—the larger section contains a creamy, bronze tinted sun protection cream for the face, the smaller section containing a similar product with more concentrated ultra violet filters to "protect delicate areas of the face such as the nose and eyelids". Both creams are lightly perfumed. The compact closes flat and can easily be carried in a pocket or beachbag. (Payot Ltd, 139a New Bond Street, London W1Y 9FB).

Lash build-up

Big Build Up (£0.35), is a new mascara from Miners that "gives longer, thicker lashes with just one application". The mascara is water resistant, but can easily be removed with an oily makeup remover or soap. Miners say its "build-up" formula does not need fibres to give the lengthening and thickening result on the lashes and it also contains a lash conditioning protein. It comes in a jumbo pack (Miners Makeup Ltd, Hook Rise South, Surbiton, Surrey).

Surgical

Colostomy bag

A drainage outlet model, which can be emptied without being removed from the body, is included in a new, odourproof, range of Coloset colostomy bags introduced by Seton Products Ltd (100, £6.00 trade).

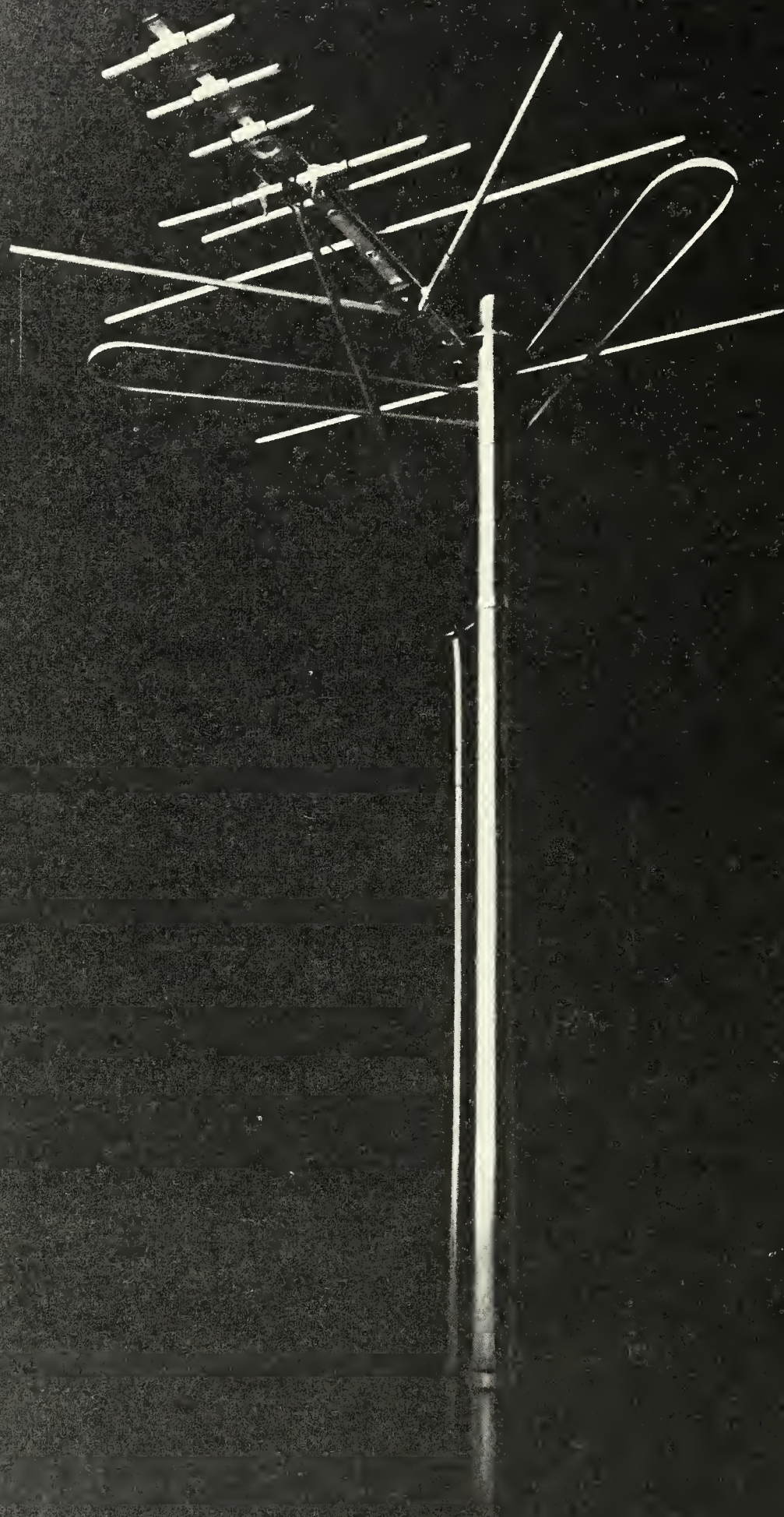
The new odourproof range is available in three standard sizes, 12in by 4in, 12in by 5in and 8in by 5½ins.

The drainage outlet model is suitable for high colostomies producing a watery discharge and may be used by either the colostomy or ileostomy patient.

The new odourproof products in effect combine two bags in one and prevent the penetration of odour for a minimum of 24 hours. The existing Coloset range has been retained to provide an inexpensive alternative for use when the appliances must be changed frequently.

Both ranges are available with either a zinc oxide or a clear, hypo-allergenic, adhesive. The makers say the single sided adhesive patch is welded to the bags in such a way that it not only eliminates the risk of leakage between bag and plaster, but also helps to reduce pressure on the stoma. The hypo-allergenic adhesive is recommended for patients who cannot tolerate zinc oxide or have sore skin around the stoma. It is not, however, recommended for use on greasy skins.

The company also distributes the Surgifix range of elastic net bandages which includes a pantie garment suitable for ostomy use (Seton Products Ltd, Tubiton House, Medlock Street, Oldham OL1 3HS).



Mightier than the pen.

Nothing on earth is as convincing as seeing the hard-to-believe happen before your eyes.

Which is why Polaroid Instant Picture Cameras will be one of the most heavily televised products in the British photographic business this summer. With a campaign reaching 36 million people, anything up to 20 times each. And lasting from April to July.

Two new commercials, telling them how our Square Shooter 2 gives beautiful colour pictures in only 60 seconds. At a price that's hard to beat. £12.36.

But powerful as television is, we know that only the printed page in major magazines and newspapers can detail all the features of our cameras and show the beauty of our pictures.

So, we'll be using colour spreads in the Sunday Times Magazine, Daily Telegraph Magazine and Readers Digest. And for our Super Swinger black-and-white camera, big spaces in national newspapers like the Daily Express, Daily Mail and the Sun. Reaching another 20 million people.

Which is where you come in. Because if there's one thing that can beat a demonstration of our cameras on television, it's a demonstration in your store.

Polaroid Instant Picture Cameras.



Polaroid and Swinger are trademarks of Polaroid Corporation, Cambridge, Mass., U.S.A.
Polaroid (UK) Ltd., Ashley Road, St. Albans, Herts.
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Thirteen Council candidates and their policies

Pharmacists registered in the Pharmaceutical Society of Great Britain will be receiving their ballot papers anytime now for the 1975 Council election. This year there are thirteen candidates for the normal seven vacancies. Short biographies plus policy statements of each contestant are presented for those voters unable to attend meetings to hear the candidates views. Voting papers must be received back not later than noon May 17.

Mr. D. J. Dalglish, BSc (Pharmacy), Aberfeldy. Qualified 1971. Proprietor pharmacist. Vice-chairman, Dundee & Eastern Scottish Branch of the Society, member of the Society's Scottish Department Executive; president, British Pharmaceutical Students' Association, 1970-71; treasurer, 1969-70. Member of Aberfeldy town council; member of the Perth and Kinross district steering committee for local government reorganisation.

Unity, I feel, must be my theme for it is in unity as a profession that our greatest strength lies. Although I am myself a general practice pharmacist, the problems of my colleagues in the hospital, industrial and academic branches of the profession are of paramount importance to me, for it is my firm conviction that advancement for any branch of the profession means advancement for pharmacy as a whole. I am concerned with the lack of advancement which the profession has made, as a result of National Health reorganisation; here we are faced with the difficulty in persuading both the Department and Parliament as to the need for a strong pharmaceutical profession. If elected I would press for continuing firm action on this question.

As a rural pharmacist, I am fully aware of the problems facing my colleagues in rural practice, especially those in England and Wales, and I feel that it is time that this problem was settled once and for all. I regret that many of the problems present when I last offered myself as a candidate,

appear still to be with us. We have as yet had no firm decision on the general sales list, the pharmacist's undoubted right to be the only supplier of medicines has not been acknowledged, nationalisation is in the air, and increasing numbers of pharmacies are in the hands of non-pharmacists. If elected I pledge myself to do everything in my power to see that many of these problems are resolved, and I hope that you will feel able to give me your vote.

Mr W. M. Darling, OBE, Sunderland, qualified 1955. Proprietor pharmacist. Member of Council since 1962, president of the Society, 1970-72. A member of the Medicines Commission; vice-chairman of the Standing Pharmaceutical Advisory Committee; chairman of South Tyneside area health authority; member of the Health Education Council; member of the Pharmacy Board of the Council for National Academic Awards; vice-chairman of the governors of Sunderland polytechnic; member of South Shields executive council; past chairman, Sunderland Pharmacy Students' Association; member of the executive of the British Pharmaceutical Students' Association, 1953-54; past chairman, Sunderland branch of the Society.

If re-elected to Council I will continue to strive for the recognition of the pharmacist not only as the custodian of the nation's medicines but as a full and valuable member of the health team. Pharmacy will stand or fall by its own actions. It is on the standards

of our individual practices and attitudes that we will be judged. It is our responsibility to demonstrate that our practices are as high as our ideals. Pharmacy in Europe is still in the melting pot. We are still in the area of debate. Opinion, ideas and theories are being and will continue to be canvassed both in Britain and in Europe. It is, therefore, important that Council continues to have the widest possible consultations and discussions before arriving at policy decisions that will have, in the long term, a profound effect on the future of pharmacy in Britain. We must ensure that no individual section of our profession is allowed to put the clock back no matter how well intentioned their aim. In modern general practice pharmacy, marketing methods have a useful and necessary role to play but they must always remain subsidiary to, and never conflict with, professional practice.

The reorganisation of the National Health Service on April 1 must be used as a springboard to increase the influence of our profession at all levels. Pharmacy has a fundamental and increasing role to play in the wellbeing of the patient. Our voice must not only be heard but be attended to. I ask for your vote to enable me to continue to work for the advancement of pharmacy both professionally and economically.

Mr Maxwell Gordon, FPS, Leeds, qualified 1930. Proprietor pharmacist with previous experience as medical representative, sales manager

and works manager, and in advertising. Chairman, Society's Yorkshire Region, 1969-1973; member of regional committee. Chairman, Leeds Branch of Society, 1966-67; honorary member of branch committee. Chairman, Leeds branch of the National Pharmaceutical Union, 1965-67; honorary member of branch committee. Chairman, Leeds pharmaceutical committee since 1971; chairman, area contractors' committee; member of area pharmaceutical committee; chairman, local organising committee, British Pharmaceutical Conference, Leeds, 1970; member of General Practice subcommittee of the Society, 1968-71. Member of Leeds family practitioner committee; member of pharmacy working group of West Yorkshire metropolitan district in preparation for Health Service reorganisation. Awarded the Society's Charter Silver Medal in 1972.

I make this promise—to voice the dissatisfaction felt by many at the state of our profession; to attempt to remedy those failings which are at the root of that dissatisfaction; to disturb the complacency of certain of our present leaders; to make plain that time is not on our side. Despite the many changes to our practice over recent years and those promised in the future, there is scant evidence of central planning. We are carried along by the tide of change not by the force of our own design. We must make it evident that our concern is not only public welfare but also that of our own members, thus creating involvement and fighting apathy.

Presently general practice is split into pro and anti Care factions—a situation that would never have arisen had the leadership been firm and professional in approach. Rapid decisions must be taken to prevent greater division. I am convinced that a bright future can be secured for pharmacy. The whole profession must be examined and its future options appraised. Then if personal ambitions are made secondary to the common good, our contribution must secure its rightful place

as a full partner in the health team.

In essence, I want to fight cynicism and apathy; to heal the splits in our professional ranks; to promote the authority of the Society for the benefit of all; to plan a future commensurate to our professional pride.

I believe I can help in this; my past contributions are evidence of my sincerity; I am prepared to serve to the best of my ability if you wish it.

Mr W. H. Howarth, Nottingham. Qualified 1942. Employed in general practice pharmacy administration. After war service, entered general practice before transferring to student training and pharmacy administration in which capacity has been a close observer of every development in pharmacy and the National Health Service during the past 25 years. Member of committee, Nottingham Branch of the Society; member of Nottingham Executive Council and shadow area committee; secretary of Nottingham Pharmaceutical and area committees; member of the British Pharmaceutical Codex 1973 pharmacy subcommittee and its dispensing panel; lecturer to the Sherwood region refresher course for pharmacists on pharmacy law and NHS matters. A justice of the peace.

The intransigence of Council in supporting proposals which they admit will adversely affect all employee pharmacists engaged in retail practice provokes me to do something positive to try to safeguard their interests. I strongly advocate the formation of a general practice employee group within the Society. This is in no way intended to create any division in pharmacy but will democratically unite the profession by ensuring the retail employees are represented in the same way as their employers, the hospital, industrial and agricultural and veterinary groups.

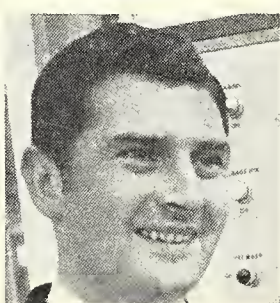
General practice is being overwhelmed by restrictive legislation under the NHS Reorganisation Act, Medicines Act and the EEC on top of normal trading restrictions and consumer protection activities. I will strongly oppose legislation imposing further penalties on the retail pharmacist whose life is becoming intolerable under the burden of restrictive legislation.

NHS reorganisation will present a lot of problems and the new community councils could provide more. Hospital and general practice pharmacists must unite in the new professional committees to ensure pharmacy speaks with one voice. By virtue of education and training a pharmacist must have a special position in the

D. J. Dalglish



W. M. Darling



Maxwell Gordon



W. H. Howarth



in relation to all aspects of the distribution of medicines we must do everything to hold and improve his status. I must devise schemes for all pharmacists to receive financial incentives to undertake post-graduate studies as other health professions. Something much more positive must be done to substantiate the claim that we are the experts on drugs and with government support for post-graduate studies the time was never more opportune.

Small pharmacy businesses in Britain provide the community with a first class comprehensive service and I am determined to protect the economic viability of British pharmacy to ensure this service continues.

Mr E. J. M. Leigh, FPS (nee Leach), Aughton, Ormskirk, Lancs. Qualified 1940. General practice employee pharmacist. Formerly in industry and hospital pharmacy. Member of Society's Council, 1964-67; elected 1968. Chairman of the Society's Liverpool branch, President, Liverpool Chemists' Association; a member of the committee since 1959; press officer and editor of branch newsletter, 1968-71. President, National Association of Women Pharmacists, 1970-72. Pharmaceutical Society's representative on national home safety committee of RoSPA since 1965. Member (representing the branch and now the Society) of the pharmacy advisory committee of the school of pharmacy of Liverpool Polytechnic since 1963; and chairman, 1968-71.

re-elected to Council will continue to strive for the enhancement of pharmacy, both professionally and economically—I want a policy of the "possible" with a realistic approach to the necessity for suitable reward and satisfying career for new graduates in every branch of the profession. Our greatest problem is still one of communication with those in as well as outside the profession, and there is still need for more information to be given to members—with more open discussion of policy between Council and other pharmaceutical organisations to improve our public image, our negotiating and bargaining powers. Consistently I have endeavoured to show the public, professions and politicians that medicines are not ordinary articles of commerce and that the pharmacist knows about drugs and is the expert in medicines.

I believe that it is in the public interest that: (1) the sale and supply of medicines, human and veterinary, should be restricted to pharmacists (2) doctors should diagnose and pharmacists dispense (3) there should be a planned, compre-

hensive pharmaceutical service with control of the opening of pharmacies in health centres and group practice areas (4) Council should ensure that the pharmacist takes his rightful place as a member of the health team and that the public and government recognise it (5) great care should be taken in EEC negotiations to ensure that the interests of all pharmacists, proprietors or employees, are protected.

My contribution to such deliberations is the collective experience of my work on the Council and of many years of top-level administration in industry, hospital and general practice pharmacy, as well as in committee work in public life. As Education Committee chairman, I thank the post-graduate course organisers for invaluable work and hope that they will receive more help in future. Please use your vote!

Dr D. H. Maddock, MPharm, PhD, Cardiff. Qualified 1957. Proprietor pharmacist. Formerly in industry and as medical representative. Commissioned in Royal Navy during National Service. Member of the Society's Council, 1967-70. Past social secretary, Romford Branch of the Society and past chairman Cardiff branch. Member, National Pharmaceutical Union Executive. Member of Pharmacy Assistants Training Board. Past chairman and secretary of Cardiff Branch, NPU. Member of South Glamorgan area health authority; member of South Glamorgan pharmaceutical committee; secretary of the General Pharmaceutical Committee of Wales; member of council of Institute of Pharmacy Management. Member of the pharmacy board of the Council for National Academic Awards. Visiting lecturer to the Welsh school of pharmacy. Awarded degree of master of pharmacy in 1970 and PhD in 1972.

Today, progress should be the keystone upon which our profession is based. Regrettably the Council of the Society does not appear to be progressing too favourably in many directions: (1) The reorganisation of the NHS has resulted in the majority of the profession having to bow down to governmental decree, allowing the poorly paid hospital pharmaceutical service to automatically assume the chief role in the new unified service. Further, this new legislation has fundamentally changed the relationship of health centres and pharmacy. (2) Efforts to improve the viability of the regrettably essential non-professional aspect of our work in general practice, have either received little support or are hampered. (3) Few detailed

documents have been published with regard to EEC harmonisation negotiations—certainly the wishes of members have not been sought on this most important topic. (4) No success has been reported in the protracted conflict concerning dispensing by doctors.

If elected to Council I pledge that I will work to improve communications between Council and all members who are affected by these significant decisions. Also that realistic and practical policies are formulated which when pursued with appropriate militancy, will result in progress for us all.

Mr H. J. Metcalfe, Newport, Mon. Qualified 1933. Proprietor pharmacist. Former secretary, vice-chairman and chairman of Monmouthshire & Newport Branch of the Society. Chairman, Rhanbarth de Cymru, 1971-73. Chairman, Monmouthshire and Newport Branch, National Pharmaceutical Union, 1969-74. Member, Monmouthshire and Newport Pharmaceutical Committee, 1967-74 and vice-chairman since 1971. Chairman of the Gwent contractors committee in the reorganised Health Service.

Pharmacists are specifically trained to practise the profession of pharmacy. In this they excel; but in many other business activities they can hope only to take second place to business and accounting specialists. It logically follows that we in general practice should set our sights to practise true professional pharmacy. In support of this basic aim I suggest that a planned pharmaceutical service is necessary; that the pharmaceutical Society should take a major part in the planning thereof.

To this end local Society branches and regional committees must establish a rapport with all Members of Parliament whose constituencies lie within their branch area. This has already been initiated in the Cardiff and Newport areas so that when the time comes for these matters to be debated in Parliament we may count on the support of spokesmen who can appreciate our aims and aspirations.

Certain merchandising schemes are at present being advocated and I recognise that the NPU Care chemist scheme may be of value in certain circumstances provided that nothing is done to shatter our professional image. The Society and the schools of pharmacy are to be commended for the excellent progress made in respect of post-graduate courses and refresher courses. We must continue

fully to support them, if only to enable our members to exercise their vital role in giving information and advice to other members of health teams in our respective situations. If elected it would be my privilege on your behalf to seek to further these aims.

Mr M. Millward, BPharm, Enfield. Qualified 1962. Superintendent pharmacist. After experience in industry and general practice pharmacy, spent over two years in professional division of Department of Health. Secretary of Enfield Branch of the Society, 1964-66, and its chairman 1968-69. Member of Coventry Pharmaceutical Committee until the beginning of April, member of Coventry area contractors committee. Member of Council, 1969-70. Vice-chairman, Anglia Region of the Society.

The dispute over the use of the title chemist, and now the latest pronouncement against self service of medicines are indications of a gulf developing between Council which leads the profession, and those who have to practise it. Of course medicines are not "ordinary articles of commerce", but that does not mean that commercial common sense must be thrown out of the window. Perhaps it is desirable to consult with every mother buying a bottle of Woodwards, or Milk of Magnesia, but who is going to be doing the scripts? Can no one see that these things are a matter of judgement for the individual pharmacist? The use of judgement is essential to professional life and those who find it an uncomfortable idea limit it at their peril. Otherwise we will move from the rule to the threat of law. I want to see members of Council keeping much closer to the members who elect them, and far less money spent on keeping in touch with pharmacists in Europe, who have nothing to teach us anyway. The hospital service has reached the position of too many chiefs and not enough Indians, a position arranged by the Department of Health; the same department which can create a being called a district community physician. Truly those who the Gods wish to destroy they first make mad. I make only two undertakings. If you elect me to Council I will so far as is humanly possible come to any branch kind enough to ask and I will listen. And I will never associate myself with any Council statement which suggests that a professional pharmacist needs to be told how to run his business. Pharmacy belongs to us. Help me to keep it that way.

Mr J. G. Roberts, FPS, Chester. Qualified 1942. Re-

gional pharmacist, Liverpool regional hospital board. Previously group pharmacist, West Cheshire hospital management committee. Previous experience in general practice and representation. Chairman, Chester Branch of the Society, 1960-61. Member, Chester pharmaceutical committee for 16 years. Member of Noel Hall Working Party postgraduate training sub-committee; member of Public Health Laboratory Service working party on microbial contamination of medicines administered to hospital patients, 1971. President, Guild of Hospital Pharmacists; member of Guild Council since 1965; chairman of Liverpool branch of the Guild, 1967-68. Member Liverpool school of pharmacy advisory committee and extramural lecturer to the college.

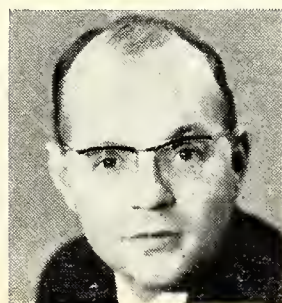
I have always believed that the pharmacist must be an independent member of the health team. Much has been achieved already but greater efforts must be made to have the profession recognised as the guardian of patient safety and the drug expert in the prescribing team. The fundamental changes now taking place in the structure of the Health Service provide the means of greater co-operation between the divisions of pharmacy to provide a uniformly high standard of service to the patient whether resident in a city or a remote village. There need be no barriers between general practice and hospital pharmacists and the patients' drug profiles can be made easily available when the patient enters and leaves hospital. Services such as quality testing and drug information now available to hospital pharmacists can be as easily available to general practice pharmacists. A 24-hour service can become a reality by combination of effort of pharmacists in the hospital and outside of it. Postgraduate education must be developed to provide extension of expertise in the new fields of activity required of the modern pharmacist such as determination of drug availability and the accumulation, storage and retrieval of drug information and the Department of Health and Social Security must recognise that money spent in this direction is probably the only possibility of influencing prescribing and rationalising the drug bill. Three years on Council has not changed my view that complete integration of the various branches of pharmacy is our only hope of survival as a profession. Separatist views, though daunting, are lessening and those I hear only increase my resolve to strive even harder to achieve integration.

Continued on p 478

Mr Leigh



Dr Maddock



H. J. Metcalfe



M. Millward



J. G. Roberts



Council candidates' policies



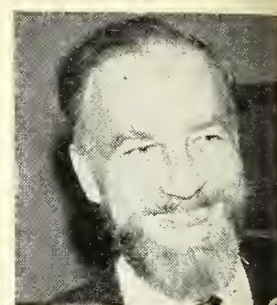
C. H. Preston Robinson



A. Roxburgh



H. Steinman



R. G. Worby

Continued from p 477

Mr C. H. Preston Robinson, FPS, DBA, Mansfield, Notts. Qualified 1932. Group pharmaceutical officer, Mansfield and Bury Hill hospital management committees. Former Admiralty pharmacist with experience, also, in general practice pharmacy (private and company). Member of National Insurance and National Insurance (Industrial Injuries) Acts local appeals tribunal, Mansfield area, 1954-60; member of National Assistance Act 1948 appeals tribunal for the Mansfield and Workson area, 1953-59. Member of committee of Mansfield Branch of the Society since 1946; branch secretary for 18 years; former chairman; present treasurer. Member of Nottingham Pharmaceutical Committee since 1959. Member of council, Guild of Hospital Pharmacists, 1950-51, and since 1954. Senior trustee, former vice-president, former treasurer, former registrar of the Guild. Founder member, former chairman and former secretary, East Midlands branch of the Guild. Member, Pharmaceutical Whitley Council Committee C since 1955 (except for break of four months). Member, General Whitley Council for the Health Services (Great Britain) since 1959. Member, joint superannuation consultative committee for the Health Service since its formation. Member of professional staffs appeal panel, Northern Ireland Health Authority. Fellow of Institute of Health Service Administrators. Awarded Evans Gold medal in 1973.

As I shall be retiring from full-time work in the near future I will have more free time at my disposal. A glance at my biographical details will, I trust, prove that I have always given liberally of my time and energy in order to promote the interests of the profession. In offering myself for election to the Council and again seeking your support I hope to have even greater opportunities to serve pharmacy in the future. If elected I would give my attention to the following: (1) Securing adequate Government recognition of the fact that all pharmacies are, in fact, health centres, conveniently sited, with due regard for consumer interest, and, as such, the maintenance of their economic viability is in the national interest. (2) To use the change of Government as an appropriate time for re-appraisal of the effects of EEC directives upon the practice of pharmacy in this country. (3) The General Sale List of medicines should be a strictly limited list of genuine common-use items. (4) As the medical profession receive little instruction in pharmacy or dispensing I would strongly oppose any extension of dispensing or

supervision of dispensing by medical practitioners. (5) The present salary structure of the hospital service fails to recognise adequately the weight of responsibility carried by the middle grades of staff and principal pharmacist. I will strive to remedy this defect. (6) The effectiveness of the new pharmaceutical advisory committees as a check upon the development of bureaucracy in the pharmaceutical services remains to be assessed in the light of experience. (7) Liaison between the pharmaceutical industry and practising pharmacists is capable of improvement—particularly in the field of drug information and packaging of pharmaceuticals. (8) Post-graduate education of pharmacists could be improved by using the techniques of the Open University.

Mr A. Roxburgh, FPS, Prestwick, Ayrshire. Qualified in 1935. Regional pharmacist, Western Regional Hospital Board (Scotland). Formerly group pharmacist, Glasgow Royal Infirmary and associated hospitals. Ten years in general practice pharmacy before entering hospital pharmacy. Member of the Society's Scottish Department Executive since 1960; and chairman, 1968-71. Member of Council since 1971. Former committee member of the Ayrshire Branch of the Society. Chairman of committee on control of medicines in hospital wards and departments (Scotland); and member of Noel Hall Working Party. Member of Standing Pharmaceutical Advisory Committee of Scottish Health Services Council.

There are basic concepts regarding pharmacy which I believe must be constantly defended when they are attacked and projected vigorously if they are not adequately recognised. They include the indispensability of the unique service which pharmacists offer the community, the principle that the professional services of pharmacists should be available to every member of the public wherever they live, the right of pharmacists in this or any country in the EEC to hold a key position in the manufacture and dispensing of medicines and the adequate remuneration of the professional expertise that pharmacists use in the Health Service.

These are the fundamental beliefs I held when I offered myself three years ago as a candidate in the election for Council. I see them still as the priorities. I believe my three years on Council together with my joint experience in hospital and general practice pharmacy and membership for 14 years, with chairmanship for 3 years, of the Executive

of the Scottish Department of the Society has given me the ability to recognise the problems facing our profession and discuss their solution. There are problems facing all the areas of our profession, problems relating to rural dispensing, the closure of pharmacies, the development of health centres, the man-power requirements in pharmacy. We must by consultation achieve co-operation and where appropriate integration of general practice and hospital practice in the re-organised Health Service. The place of pharmacy in Europe and especially the influence of decisions within the EEC on the practice of pharmacy in Britain must be carefully watched. All these matters call for calm consideration and discussion followed by vigorous assertion and projection of our claims and opinions. In asking for your support, I offer to use my experience with the utmost integrity for the good of our profession.

Mr Harry Steinman, OBE, FPS, Manchester. Qualified 1927. Proprietor pharmacist. Treasurer of the Society since 1963. Charter gold medallist, 1973. First elected to the Council in 1947. Vice-president, 1954; president, 1955. Member of the Central Health Services Council; chairman of the Standing Pharmaceutical Advisory Committee. Recently appointed to the North-western Regional Health Authority. Chairman of the National Pharmaceutical Union in the silver jubilee and golden jubilee years. Member of the NPU executive committee. Member and past chairman of the Central NHS (Chemist Contractors) Committee. Member and past chairman of the Manchester and Salford branch of the Society; member and past chairman of the Manchester and Salford branch of the NPU; has also served as chairman of the junior branch of the Manchester Pharmaceutical Association. Member and past-president of the management committee of the Executive Councils' Association (England). Member and past chairman of Manchester Executive Council; chairman of Manchester Pharmaceutical Committee. Member of the Joint Pricing Committee for England. Chairman of the pricing methods subcommittee of the Joint Pricing Committee.

I shall always regard the interests of the individual pharmacist as being paramount. Future generations of pharmacists depend upon the actions of pharmacists today. The image of pharmacy rests in the hands of each pharmacist and the only enduring advertisement lies in the standard of service provided for

the community and those with whom we are in daily contact. Our skill and our knowledge must at all times be applied to the over-riding interests of the public. Our challenges to the Medicines Commission should be in this interest.

During my years of service, both with the NPU and the Society, I have always endeavoured to bring the two organisations closer together. I will go on doing so because I believe it is imperative that consultation with all other pharmaceutical organisations is essential to our future well being. The development of group practices, health centres and the disturbing symptom of leap-frogging still causes misgivings to all concerned. General practice pharmacy must be made attractive to the new graduate, and it would appear that a rationalised pharmaceutical service is the answer to both the public and the profession. Our position within the restructured Health Service must be carefully watched so that we can ensure the best possible pharmaceutical service to the community.

I believe pharmacy is oppressed because of the unresolved rationalisation of pharmacies—because of the lack of use of the pharmacist's skill and knowledge—and the lack of a forward-looking policy on our part means stagnation. To be afraid of intellectual boldness in improving the pharmaceutical service to the public will be to earn the contempt of those who follow us.

Mr R. G. Worby, Woodford Green. Qualified 1953. Proprietor pharmacist, following early experience in hospital pharmacy. Former member of the committee and bulletin editor of East Metropolitan Branch of the Society. Member of the National Pharmaceutical Union Executive Committee and of the Central NHS (Chemist Contractors) Committee. Secretary and past chairman of North-east London pharmaceutical committee. Member of the North-east London Executive Council and vice-chairman of its finance and general purposes committee. Secretary of Barking and Havering, and Redbridge and Waltham Forest area chemist contractors committees, and chairman of Barking and Havering family practitioner committee.

Having served on the NPU Executive Committee and on the Chemist Contractors Committee I am very conscious of the need for maximum understanding and liaison between Council and both those bodies. Only by pulling together can the maximum influence be exerted on behalf of the profession as a whole. A frag-

mented approach to the EEC or to the Department of Health at home, can only weaken pharmacy and place all our aspirations in jeopardy.

Differences of principle and of emphasis must be reconciled. Commercialism must be tempered with the inevitable constraints which are inseparable from a profession, and sheer professionalism must itself be tempered with realism and practicality. The Care voluntary trading organisation must come to mutually acceptable terms with Council, for whilst realism demands due attention to the maintenance of adequate retail turnover, it must not be at the expense of the profession of pharmacy itself. By the same token the idealistic, impractical and somewhat theatrical creed of direct personal supervision must give way to a more appropriate requirement of personal control and responsibility. This is in line with the responsibility exercised by our medical colleagues as well as by continental pharmacists, who bear full responsibility for the actions of their staff without the necessity of indulging in a charade of actually hearing and seeing their instructions carried out.

The existing P1 range of drugs and medicines should be available for sale on registered premises by staff under the direct control of a pharmacist, although not necessarily in his presence. A further fairly extensive group of preparations, including certain sedatives, topical steroids and antibiotics, and a number of the S4B analgesics, anti-inflammatories and anti-rheumatics should then be specified for sale personally by the pharmacist, and, where it was considered advisable, notification to the patient's doctor could be incorporated.

It is idle to expect general practice pharmacy to achieve for us all a dignified and responsible public image if it is hog-tied and compassed about with petty restrictions.

Auditors: no election

There are only five candidates for the five auditor places this year. The following who have been nominated will be declared elected:-

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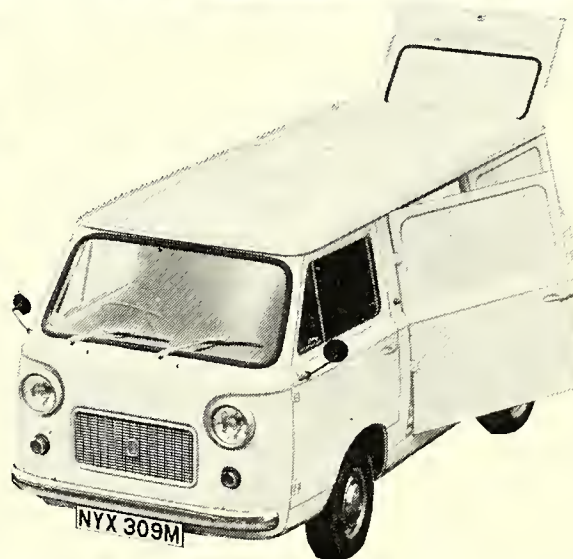
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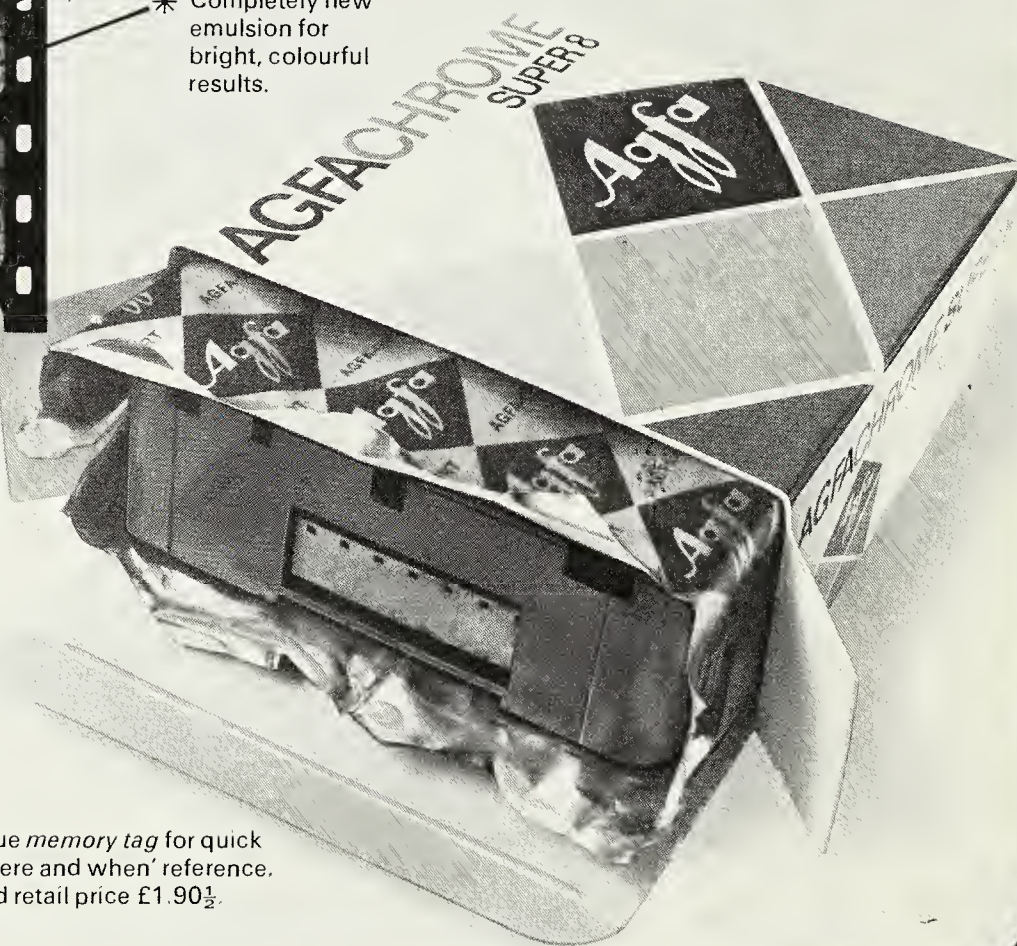


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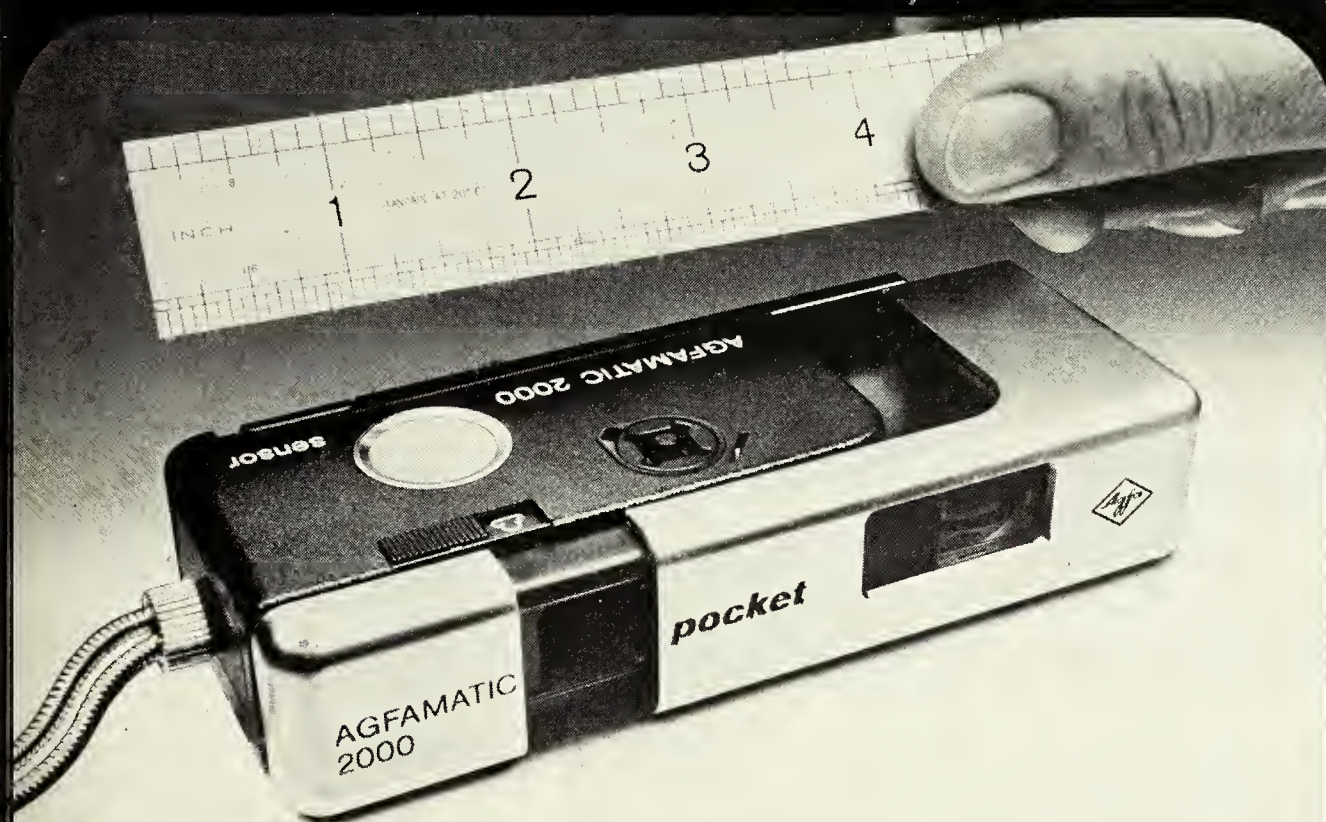


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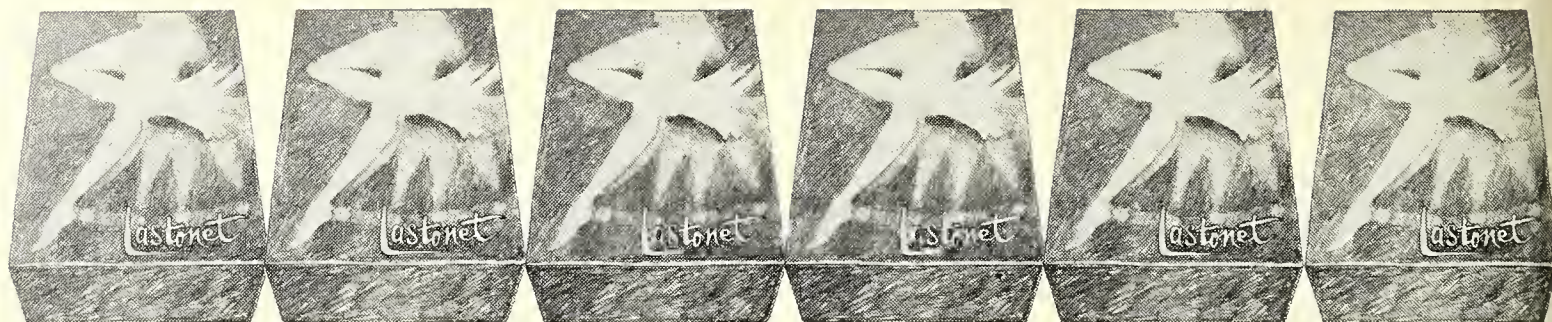
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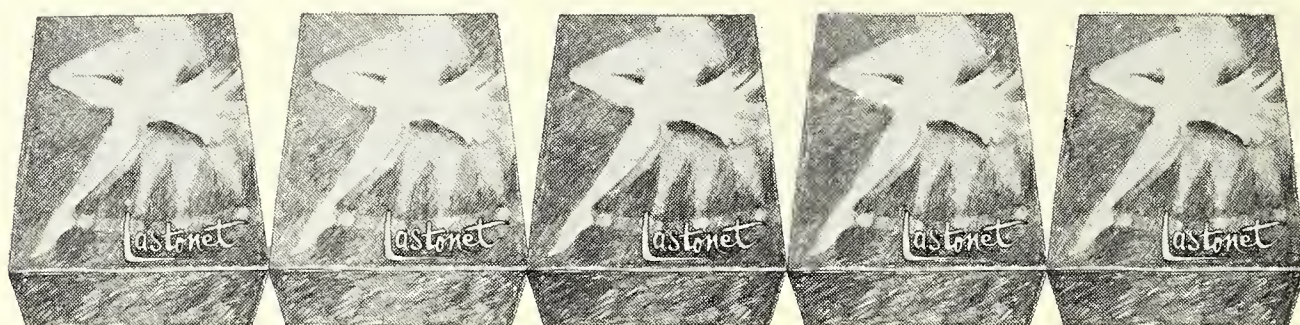
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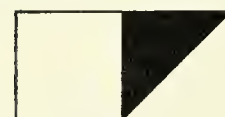
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Professional News

Pharmaceutical Society of Great Britain

Council suspends ban on use of restricted titles in animal medicines advertising

The Council of the Pharmaceutical Society, relaxing, temporarily, restrictions on the use of titles in advertising relating to products for animal use.

At present the Statement Upon Matters of Professional Conduct permits advertising or canvassing to promote the sale of veterinary products or medicinal products for animal use, but the inclusion of certain restricted titles (eg chemist) in advertisements is normally regarded as direct advertising of professional services. In view of the impending changes under the Medicines Act leading to the distribution of certain animal medicines through pharmacies only Council feels it would be desirable that the status of the supplier should be published, so that purchasers are made aware of the pharmaceutical services available at the business. During the period of transition no objection will be taken by the Council of the Pharmaceutical Society to the inclusion in any advertising of:

- the description "pharmacy";
- the title "chemist", provided that, in the case of bodies corporate, the use of the title is otherwise lawful;
- a reference to the name of the pharmacist who is in personal control of the business;

- a short factual explanation of the changes effected by the Medicines Act.

The relaxation applies only to medicines and other products for animal use and no advertising of any other products or activities should be associated with it. It will enable information to be given to farmers about the services and supplies available from pharmacies. At the end of the proposed transitional period this relaxation will be withdrawn.

Little general practice research

The Council, at its April meeting, learned that the recent regional secretaries' meeting had been told there had been very few inquiries from members during 1972 and 1973 in response to the Council's proposals for promoting general practice research. The meeting felt that the main reason why members were not undertaking research was that they did not have sufficient time during their normal professional practice. Until funds became available for full-time work, the meeting thought there could never be any significant increase in general practice research. The Organisation Committee decided that the attention of members should, from time to time, be drawn to the arrangements for research. The study group set up to examine

nationalisation of the pharmaceutical industry has advised that the Society should not at the present establish a policy. The group recognised that there are many ways in which a measure of "public ownership" of an industry might be introduced and said it would be preferable to comment upon a specific proposal. The study group is to be kept in existence so that its members will be fully informed if proposals with implications for the pharmaceutical profession are advanced by the Government.

New move on rural areas

The president has written to the Secretary for Social Services requesting a meeting on dispensing in rural areas. At the same time a letter was sent to the Department of Health urging an immediate standstill on the transfer of patients from prescribing to dispensing lists as an interim measure.

A letter setting out the Society's views on the self-service and self-selection of medicines has been sent to the secretary of the General Sale Lists Committee of the Medicines Commission. The letter says that "the Council would support an overall restriction being imposed on display techniques for medicines which give the public direct access to them" and that it is "convinced that the prohibition of such display techniques would provide a clear indication to the public of the difference between medicinal products and ordinary articles of commerce".

Following correspondence with the Secretary of State on prescription charges, the Society is to send a letter confirming that she can expect the co-operation of pharmacists in the implementation of the changes.

It was agreed that the Society should oppose any suggestion that pharmacists in the NHS should be expected to charge a patient an additional sum for child-resistant containers. The Practice Committee felt that the choice of container for any medicine should be left to the professional discretion of the pharmacist and that the NHS should provide reimbursement for containers used.

On the recommendation of the Practice Committee, it was decided that a letter should be sent to the Secretary of State repeating the Society's views on the advantages of including the general practitioner services in the overall scheme for the provision of family planning services in the NHS and expressing the view that it was wrong in principle that a charge be im-

posed in one part of the NHS for a service which was completely free in another part. The Society is also to ask that the pharmaceutical aspects of the scheme should be discussed between the Department and the profession at once so that there will be no further delay once the GPs have agreed the conditions on which they would participate.

Following the branch representatives' resolution that pharmaceutical manufacturers should supply small packs of galenic preparations to obviate unnecessary stock holding by general practice pharmacies, representations were made by the Society to the Association of the British Pharmaceutical Industry on the matter. The ABPI, in its reply, had concentrated on the cost of such packs, and said that in the coming months further rationalisation would bring about both pack size curtailment and deletion of items. Manufacturers had to take into account not only business with general practice pharmacists, but also sales to hospitals and in export markets. Highest demand might be for a pack size which was not that most frequently purchased by retail pharmacists.

The Ethics Committee was given a report of a meeting between representatives of the Society and the National Pharmaceutical Union on the "Care chemist" scheme. Two resolutions had been received in relation to the scheme. Hastings branch called on Council to "take any necessary measures to cause the offensive and invidious advertising of the 'Care and chemists' in the ICM Ltd present campaign to be brought to an end." A resolution from the South East England Region deplored the use of the term "Care Chemist" as being totally divisive in character, and pressed the Council to exercise "such powers as it possesses to end the use thereof". Council agreed to send a letter outlining its views to the NPU's secretary.

Co-op's campaign discussed

The Ethics Committee also considered whether the manufacturers concerned with the Co-operative Society's "Beat the British winter" campaign had breached the code laid down by the Proprietary Association of Great Britain. It was decided that the PAGB's attention should be drawn to the matter.

It was reported to the Science Committee that many members were experiencing difficulty in finding wholesalers prepared to manufacture small quantities of certain special pharmaceutical preparations. Mr S. C. Jolly (director of the Society's Department of Pharmaceutical Sciences) said that the pharmaceuticals laboratory in Edinburgh had recently been asked to consider the preparation of these "specials" and he wondered if such a service to members should be made available. After discussion, the Committee agreed that the service could best be developed by hospital pharmacy and not by the Society.

A motion submitted by Mr S. Howard "that the term of office of the treasurer should not normally exceed three years in order to achieve a wider distribution of the training and experience which the treasurership affords" was carried by 12 votes to seven.

How to your own on the Tra Board

Get back training d.

If you're an employer in the distributive trades you're likely to be receiving an official-looking form within the next few weeks from the Distributive Industry Training Board. It's called a Statutory Return.

We're not wild about the title—but by Act of Parliament we're required to send it out and you're required to return it.

Completing and returning this form quickly can save you time and money. As a levy-payer to the DITB you can qualify for grants and bonuses for the training you give your staff.

You can have the services of a training adviser from the nearest DITB area office.

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It all starts with sending back that Statutory Return—and it all adds up to getting your own back from the Training Board.

**YOU
KNOW
TRAINING
PAYS**



Arm Yourself with the Facts

To Distributive Industry Training Board,
MacLaren House, Talbot Road, Stretford,
Manchester M32 0FP. Tel: 061-872 2494.

☐ Please arrange for a training adviser to visit me

Please send me details of the following:

- | | |
|--|---|
| <input type="checkbox"/> Grants for training | <input type="checkbox"/> Publications and |
| <input type="checkbox"/> Courses in Distribution | training aids |
| <input type="checkbox"/> Careers in Distribution | <input type="checkbox"/> Training Films |
| | <input type="checkbox"/> The DTA Award |

Name _____

Position _____

Company _____

Address _____

**Distributive Industry
Training Board**



Company News

Reckitt & Colman's continued growth

The chairman of Reckitt & Colman Ltd, Mr A. M. Mason says in his annual statement to shareholders that with the strength of the group's financial position, and its ability not only to press ahead with its traditional businesses but also to grasp new opportunities, he is confident that 1974 will prove to be another year of growth for the group.

As previously mentioned (*C&D*, March 30, p. 378), pre-tax profit for 1973 was £29.16m (against £23.81m in 1972). The effect of the new corporation tax rate introduced in the budget would be to reduce the attributable earnings of £13.75m (£12m) by £160,000.

An analysis of sales £225.76m (£213.69m) and trading profit £30.23m (£25.27m) shows toiletries £28.58m (£23.66m) and £3.09m (£2.16m) and pharmaceuticals £22.17m (£16.76m) and £4.54m (£3.05m) respectively.

Total export sales from the UK increased 20 per cent. Conditions continue to favour British exports and priority is given to this business, which generates substantial profit, the chairman says.

Dreamland Electrical's profit record

From sales of £3.92m in 1973 (compared with £3.47m in 1972), Dreamland Electrical Appliances Ltd had a pre-tax profit of £512,000 (against £360,000). Profit after tax was £292,000 (£253,000).

The directors say full advantage has been taken in the charge for tax of the pre-acquisition losses of Monogram Electric which at December 31, 1973, were estimated to amount to £785,000.

Production this year was adversely affected by the three-day working week and by the shortage of certain supplies, but the shortfall should be overcome by the end of the year. Forward orders to date are encouraging and the directors look forward to another successful year.

Naarden International

For Naarden International the financial year 1973 marked the end of a period of somewhat retarded growth and the resumption of the traditional tempo. Consolidated sales rose by 14.1 per cent (1972: 6.1 per cent) to Hfl 236.3m, while net profit showed an increase of 22.1 per cent (compared with a drop of 13.3 per cent in the previous year), totalling Hfl 6.35m.

Fragrances and flavours, the main pillars of the group's activities, provided the greater part of the increase in sales, their shares in the total rising by 19.9 per cent

and 12.9 per cent respectively. These two product groups now account for 81 per cent of turn-over.

Unilever toiletry sales

Unilever had an "excellent" year for their toilet preparations during 1973 according to the group's annual report just issued. Progress was particularly noteworthy in the UK while Brazil and South Africa each had a record year. To meet the expansion of sales production facilities were extended particularly in the UK, Germany and Italy.

Briefly

W & T Avery Ltd have opened a branch at 244 Price Street, Birkenhead.

Savory & Moore Ltd, have recently acquired the following branches: 51 High Street, Alcester, Warwicks and 11 High Street, Wareham, Dorset.

Eli Lilly & Co's net sales for 1973 amounted to \$972.55m a rise of 19 per cent over 1972. Net income at \$155.52m was up 23 per cent while research and development costs advanced 12 per cent to \$82.29m.

Unichem Ltd was the subject of a profile in the business section of the London *Evening Standard* on April 16.

W B Pharmaceuticals who were recently acquired by Boehringer Ingelheim (*C&D*, March 30, p. 378) have now moved to PO Box 23, Bracknell, Berks RG12 4YS.

Wansbeck Pharmacy Ltd, (registered office: 137 Ashington Drive, Stakeford, Northumberland), was compulsorily wound up in the High Court on April 8. The petitioners were Coty Ltd, judgement creditors for £125, there were a number of supporting creditors. Wansbeck Pharmacy was not represented.

Appointments

United Industrial Co Ltd have appointed Mr A. D. Ashley and Mr L. Rowe to the board.

Roure Bertrand Dupont Ltd have appointed Mr R. W. Harris their UK sales manager.

Beecham answer French criticism

Answering criticisms by a French newspaper that Beecham Group's ampicillin in France was much higher in price there than in the UK the Group last week stated that the French price was negotiated with French officials only last September and it had not heard of any action to change this.

It had been suggested that Beecham faces action in France similar to the move against Hoffmann-La Roche group in Britain last year.

Although package sizes and retailing arrangements differ in France, the closest comparison is between the wholesale price of 20 capsules of 500 mg; in France this is £2.67 for ampicillin and £1.05 in the UK. According to Beecham, the differential arises partly because the ampicillin sold in France is supplied by its Belgian factory, which draws its raw materials from the UK and has to pay import duty of around 9 per cent.

Additionally, the Belgian plant is said to have "significantly higher" operating



Mr Simon H. Cussons, chairman of Cussons Group Ltd pours champagne over truck to deliver a load of Imperial Leather soap to Cussons' new warehouse at Farnworth, Bolton, Lancs. The increased space was necessary to cope with their growing export trade

Appleford Ltd: Mr Neville R. Kirby has become managing director. Mr Kirby joined the board in 1972 as general manager and director.

Department of Health and Social Security Dr F. Wrigley, former deputy chairman Wellcome Foundation Ltd, has been appointed consultant adviser to Department of Health and Social Security on commercial policy and exports. It will be a part-time appointment.

Germaine Monteil: Eli Clyne, BSc, has been appointed president for Germaine Monteil—Europe with responsibility for all European markets. Dutch by birth and British by naturalisation, Mr Clyne has worked in most European countries.

Seton Group have appointed Mr J. R. B. Gould group financial director with a seat on the boards of Seton Products Ltd, Tubifoam Ltd, and Masterpeace Products Ltd. Mr P. Kirkby becomes the group UK sales director on the board of Seton Products. To the board of Tubifoam Ltd are appointed Mr A. L. Payne as group works director and Mr J. F. Crookes as group production director.

costs, particularly wages. There were also high marketing and costs in France.

Beecham also said that French law does not permit the marketing of pharmaceuticals unless there is a local element in their manufacture. Because of this, ampicillin had to be shipped from Belgium in bulk and handed over to a French contractor for formulation and packaging.

In any case, because the drug is supplied from Belgium, it seemed likely that any French move about price would relate to Belgium, not the UK.

□ Beecham, meanwhile are suing the French Pechiney-Ugine-Kuhlmann group for patent infringement (last week p.451) whose subsidiary, SPRET, has been, it is alleged, marketing ampicillin without a licence from Beecham, holders of the French patent until 1980.

The SPRET product has been approved by French officials as up to local standards but Beecham stresses that this applies only to its safety aspects.

Market News

RESTRICTED TRADING

on, April 17: In a week shortened by
er holidays, trading was only on a
cted scale with prices of many
modities scarcely tested.

ong crude drugs which moved up in
e were balsam tolu, hydrastis, quillaia
lanolin. There was a slight easing in
hol on the spot. There were no ship-
s to Europe, United States or UK
enna from Tuticorin during March
use of scarcity of vessels calling at
ort.

arer in the essential oil market were
nella, clove leaf, Brazilian pepper-
and petitgrain.

creases in pharmaceutical chemical
es and shortages in supplies con-
e to be recorded. Higher were
ides, calcium carbonate and oleic

Pharmaceutical chemicals

caine: 50-kg lots of BP, £3.03 kg.
ides: Crystals (£ per metric ton).

	under 50-kg	50-kg	250-kg
onium	680.00	560.00	535.00
sium*	600.00	505.00	480.00
m	600.00	498.00	473.00

der plus £25-£30 as to quantiv.
ne sulphate: £20 kg.
nine: BP £424.00 per 1,000 kg for 250-kg lots.
um carbonate: B.P. light £65.00 per 1,000 kg.
ocaine hydrochloride: £49.50 kg.
acid: Spot BP granular hydrous per metric
or single deliveries from £361 to £470 accord-
o maker. Anhydrous from £387 to £506.
nine: 5-kg hydrochloride £285 kg; bismuth
e £200.

Ergometrine maleate: 100-g lots £5.25 g.
Fentichlor: 50-lots £1.73 kg.
Ferrous fumarate: £0.50 kg for 50-kg lots.
Ferrous gluconate: £733 metric ton delivered.
Ferrous phosphate: In kegs £493.50 metric ton.
Glucose: (per metric ton in 10-lots) monohy-
drate powder £94; anhydrous £175; liquid 43°
Baumé: £91 (5-drum lots).
Glycerin: Nominal.
Hydrogen peroxide: 35 per cent, £149 metric ton.
Hyoscine hydrobromide: £314.14 kg.
Hyoscyamine sulphate: (100-g lots) £59 kg.
Iron phosphate: In 50-kg lots £493.50 metric ton.
Isoprenaline sulphate: 1-kg £18.00 kg.
Kaolin: BP is £66 per 1,000 kg natural £77.50;
light £82.50 ex works.
Lobeline: Hydrochloride £1.20 per g.
Magnesium carbonate: BP per 1,000 kg heavy
£280; light £210.
Magnesium hydroxide: BPC £560 metric ton.
Magnesium oxide: BP per 1,000 kg heavy £980;
light £620. Paste £280.
Magnesium peroxide: 50-kg lots 23-25 per cent.
£0.59 kg.
Magnesium sulphate: BP crystals £46.75; BP
exsiccated £115.40 per metric ton, ex works.
Magnesium trisilicate: £470 metric ton.
Mestranol: £120 kg.
Methadone hydrochloride: Subject to DDA Regu-
lations £0.15 per g for 100-g lots.
Methyl salicylate: Per metric ton in 5-ton lots
£540; 1-ton £550; 500-kg £560; delivered UK.
Norethynodrel: £1700 per kg.
Oleic acid: BP £317 per metric ton delivered UK.
Paracetamol: Scarce. Per metric ton, in 10-ton
lots, £1,570; 5-ton £1,620; 1-ton £1,670.
Piperazine: Under 50 kg lots, adipate £1.00 kg;
citrate £0.95; phosphate £1.10.

Crude drugs

Balsams: (kg) Canada: nominal, Copalba: BPC
£3.00 kg spot. Peru: nominal. Tolu: BP £3.25
spot; £3.15 cif.
Belladonna: (metric ton) Herb £310; no cif. Root,
£490 spot; £480, cif. Leaves £750, cif.
Cloves: (Per ton, cif)—Ceylon £2,540; Madagas-
car £2,400; Zanzibar £2,660.
Gentian: Root £1.35 kg, cif.
Ginger: (ton) Cochín £440, cif, Sierra Leone
£675, cif. Nigerian split £520 spot; £475, cif
peeled £700, cif.
Hydrastis: £9.70 kg spot; £9.50, cif.
Lanolin: Anhydrous BP minimum 1,000 kg from
£474 as to grade; cosmetic £543; technical £437.
Menthol: Brazilian £17.40 kg spot; £18.00, cif.
Chinese £20.20, cif.
Pepper: (ton cif) Sarawak black £655; white
£960.
Quillaia: £1250 metric ton spot.
Seeds: (ton) Caraway: Dutch forward £1,500
cif. Celery: Indian £430, cif. Coriander: Moroccan
£110, cif. Cumin: Nominal Dill Indian £220,
cif. Fennel: from £335 to £390, cif. Fenugreek:
£160, cif. Mustard: English £320-£340 spot. Styrax
£2.60 kg spot; £2.50, cif.
Turmeric: Madras finger £290 ton, cif.
Valerian: (metric ton) Indian and Continental
nominal.

Essential and expressed oils

Almond: Drum lots £0.80 kg.
Amber: Rectified £0.29 kg spot.
Anise: £27.00 kg spot, £24.75, cif.
Bay: West Indian about £14.00 kg.
Bergamot: From £12.00 kg as to grade.
Birch tar: Rectified £3.50 kg.
Bois de rose: Shipment £11.46 kg, cif.
Buchu: English distilled £265 kg.
Cade: Spanish £1.20 kg spot.
Cajuput: £1.50 kg on spot.
Camphor white: £3.00 kg spot; no shipment.
Cananga: Java £12.00 kg spot.
Caraway: Imported £18.00 kg. English £45.00.
Cardamom: English distilled £96.00 kg.
Cassia: Chinese not offering.
Cedarwood: £2.00 kg, cif for afloat; £2.10, cif,
forward.
Celery: English £35.00 kg.
Cinnamon: Ceylon leaf £4.50 kg; bark, English
distilled £170.00 kg.
Citronella: Ceylon £4.00 kg spot and cif.
Clove: Madagascar leaf spot cleared, shipment
£4.35 kg, cif.
Cod-liver: BP in 45-gal lots £1.48 gal; veteri-
nary £0.80-£0.85.
Coriander: £13.00 kg spot.
Cubeb: English distilled £18.00 kg.
Dill: From £9.30 kg spot.
Eucalyptus: Chinese £7.00 kg, cif, 80-85 per cent.
Spanish £6.30 kg, cif.
Fennel: Spanish £10.00 kg nominal.
Geranium: (kg) Bourbon £22.00 kg.
Ginger: English distilled £56.00 kg.
Juniper: Berry from £11.00 kg.
Lavender: French from £18.00 kg spot.
Lavender spike: £12.50 kg spot.
Lemon: Sicilian best grades from £10.00 kg spot.
Lemongrass: Spot £4.10 kg; forward £4.20, cif.
Lime: West Indian £8.50 kg spot.
Mandarin: £8.00 kg.
Nutmeg: (per kg) English distilled from West
Indian £23.00; from E. Indian £27.00. Imported
£5.70.
Olive: Spanish exports prohibited. Tunisian with-
drawn. Spot £1,040-£1,050 metric ton.
Palmarosa: £11.00 kg spot and cif.
Patchouli: Spot £7.50 kg; £7.00, cif.
Pennyroyal: To arrive £4.90 kg.
Pepper: English distilled ex black £55.00 kg.
Peppermint: (kg) Arvensis-Brazilian spot and
shipment ci £8.25 kg. Chinese £10.25 spot, ship-
ment £10.30, cif. Piperata American from £19.00.
Petitgrain: £12.00 kg, cif.
Pimento: For shipment, 2,200 Jamaican dollars,
cif.
Pine: (kg) Pumillonis £1.75; sylvestris £0.51.
Rosemary: £5.65 kg, spot.
Sandalwood: Mysore £90.00 kg spot
Sage: Spanish £8.80 kg spot.
Sassafras: Chinese £4.00 kg; Brazilian £3.00 spot.
Spearment: Chinese £7.50 kg; American £11.00.
Thyme: Red £65/70% £8.30 kg.

The prices given are those obtained by importers
or manufacturers for bulk quantities and do not
include value added tax. They represent the last
quoted or accepted prices as we go to press but
it should be noted that in the present state of
the markets quotations change frequently.

Letters

Charge the doctor?

cerning "Hampshire Pharmacist's"
cription for 15 items, I hope he will
l in his own account to the doctor for
dispensing fees at 17p = £13.09. This
on the assumption that sufficient for
n days of each item should have been
cribed, as is indicated by the suggested
ntities in the National Formulary.
cidentally we ran through our own
ots for March, and found we had dis-
sed 203 prescriptions calling for 100
ets or more, representing a minimum
in dispensing fees for this month alone
£34.15. Several of these prescriptions
e for one tablet daily.
s our income from NHS dispensing
cally the fees is it not time our negotia-
asked someone like Mr Scanlon to
the bargaining for us?

Ivor M. Clarke
London SE10

Now invoicing

s have a monthly award for the firm
h takes the longest in correcting in-

voice mistakes and is the slowest in pre-
senting its monthly accounts.

My raspberry goes to Richard Daniels
of Derby who, despite several written re-
quests, are no further than March 19
with their invoices and no statement has
been sent for March yet.

T. H. Curry,
Heywood, Lancs.

Coming events

Monday, April 22

Harrow Branch, Pharmaceutical Society,
Clinical lecture theatre, Northwick Park Hospital,
Watford Road, Harrow, at 8 pm. Annual meeting.
Nottingham Branch, Pharmaceutical Society
Postgraduate medical centre, City Hospital
Nottingham, at 8 pm. Annual meeting.
Plymouth Branch, Pharmaceutical Society,
Board room, Greenbank Hospital, at 8 pm. Mr
D. F. Lewis on "Current pharmaceutical matters".
Royal Society of Health, Metropole Hotel,
Brighton. Health Congress. Until April 26.

Tuesday, April 23

Chester Branch, Pharmaceutical Society,
West Cheshire Hospital, Chester, at 8 pm. Annual
meeting and curry supper.
Leicester and Leicestershire Branch, Pharmaceu-
tical Society, Postgraduate centre, Leicester Royal
Infirmary, at 8 pm. Annual meeting.
Teesside Branch, Pharmaceutical Society,
Marton Hotel and Country Club. Annual meeting.

Wednesday, April 24

Leeds Branch, Pharmaceutical Society,
University of Leeds. Joint meeting with Leeds BMA.
Dr J. F. Wilkinson on 'Pharmaceutical antiques'.
Sheffield Branch, Pharmaceutical Society,
Royal Victoria Hotel, Sheffield, at 8 pm. Annual
meeting.

West Hertfordshire Branch, Pharmaceutical
Society, Noke Hotel, St. Albans, at 8.15 pm.
Annual meeting.

Thursday, April 25

Bedfordshire Branch, Pharmaceutical Society,
Board room, Luton and Dunstable Hospital, at 8 pm.
Annual meeting.

Lancaster, Morecambe and Westmorland
Branch, Pharmaceutical Society, Clarendon
Hotel, Marine Road, Morecambe, at 7.45 pm.
General meeting.

Northumbrian Branch, Pharmaceutical Society,
Winthrop Laboratories, Edgefield Avenue,
Fawdon, at 8 pm. Annual meeting and cheese
and wine evening.

Stirling and Central Scottish Branch,
Pharmaceutical Society, Golden Lion Hotel,
Stirling, at 8 pm. Annual meeting.

Thames Valley Branch, Pharmaceutical Society
Winthrop House, Surbiton, at 8 pm. Dr D. Train
on 'Pollution in perspective'.

Friday, April 26

Croydon Branch, Pharmaceutical Society,
Greyhound Hotel, Croydon, at 8 pm. Annual meeting.
Merseyside Branch, National Association of
Women Pharmacists, School of pharmacy,
Liverpool Polytechnic, Byron Street, Liverpool,
at 7.30 pm. Annual meeting.

Sunday, April 28

North Western Regional Committee,
Pharmaceutical Society, Gables Hotel,
Balmoral Road, South Shore, Blackpool, at 10 am.
One-day conference on "Legislation and
reorganisation".

Immac

TRADEMARK



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now in larger bottle

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x 7") £200.

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Pharmacist assistant

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PHARMACIST with long experience in pharmacy retail trade, requires position as an assistant, preferably in Birmingham area. Salary by negotiation. Phone: 021-554 5950.

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DRUGSTORE NORTH WEST COVENTRY

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WE WILL PURCHASE for cash a complete stock of a redundant line, including finished or partly finished goods packaging, raw materials, etc. No quantity too large. Our representative will call anywhere. Write or telephone Lawrance Edwards & Co. Ltd., 6/7 Wellington Close, Ledbury Road, London, W.11. Tel: Park 3137-8.

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Hospital appointments

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to be responsible for ward services to St. Francis' Hospital, (within very easy access of East Dulwich Station). It is envisaged that a ward pharmacy system will be introduced to this geriatric hospital, which is closely linked to an acute unit at Dulwich Hospital.

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(Quality Control) to be based at King's College Hospital. This post would provide a young graduate with experience in setting up a new quality control department.

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Salary £1,806-£2,256 inc. L.W. — These posts present an opportunity for newly qualified pharmacists to gain experience in all aspects of hospital pharmacy within this teaching group.

Job descriptions and application forms available from the Personnel Officer, King's College Hospital, Denmark Hill, London SE5 9RS. Tel: 274 6222 Ext. 2724/8. Further details and departmental visits may be arranged by contacting the Area Pharmacist. Ext. 2272.

Redbridge & Waltham Forest
Area Health Authority

**EAST RODING DISTRICT
Barking Hospital,**

Upney Lane, Barking, Essex

**SENIOR PHARMACY
TECHNICIAN**

Group post, based at Barking but may be required to work at other hospitals within the Group. Salary scale £1,458-£1,815 p.a. plus £126 p.a. London Weighting. Applications to Senior Administrator, King George Hospital, Ilford, Essex.

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required, at recently modernised and enlarged pharmacy in this 964 bedded, mainly acute District Hospital. Within easy reach of pleasant residential areas and central London. Enquiries to Area Pharmacist, Tel. 01-539 5522. Ext. 125. Application forms obtainable from Hospital Secretary Ext. 351 returnable as soon as possible.

**Reading & District
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Committee**

3 Craven Road, Reading

PHARMACY TECHNICIAN

Apothecary Hall or City and Guilds, to work in the Reading Hospitals. Previous hospital experience not essential.

Enquiries and applications to Mr. A. Burton, Area Pharmacist, Royal Berkshire Hospital, London Road, Reading. Tel: RDG 85111 ext. 302.



TWO SENIOR PHARMACISTS

Required for the new Modern Pharmaceutical Department at the Headquarters of the Area Pharmaceutical Service. The Area Pharmacist has been appointed and the implementation of the Noel Hall Structure will follow shortly.

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Salary—Whitley Council Rates of Pay and Conditions of service—at present £1,809 to £2,235 per annum plus higher qualification allowance.

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Business opportunities

PRODUCT licence holder seeks contact with tablet manufacturer. Box No. 2242.

This summer, more than ever, there'll be a burning need for Sylvasun.

Last year Sylvasun ran the biggest campaign ever used by a sun preparation.

You, and around a million sunburn sufferers, reaped the benefits.

This year the Sylvasun campaign is even bigger.

So in addition to last year's satisfied customers, there'll be a great demand from new users.

From May to August our full page advertisements will be telling millions of people how Sylvasun can help reduce the risk of burning.

They'll tell how Olympic athletes and sportsmen have proved Sylvasun effective, and how the product has already been tried successfully by thousands of holidaymakers.

Sylvasun comes in special display outers.

Other point of sale material is available from your Chefaro representative or direct from the manufacturer.

It all adds up to a healthy growth in your total sun preparation business.

Last year the average chemist sold between 5 and 12 dozen packs of Sylvasun.

This year, with increased advertising and demand, your profits should be even greater.

With the special bonuses, it won't only be your customers who'll notice the benefit.

Sylvasun.
Helps stop you burning while you tan.



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24ColorCard CameraCray.com



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